

Healthcare under pressure?

- Older population / demographics
- Expensive medicine + Advanced treatment
- High levels of burnout among staff, -> Staff leave hospitals
- Lack of staff
- Post-covid
- Environmental crisis
- Innovational push: FOMO

-> We experience high levels of volatility,
uncertainty, complexity and ambiguity (VUCA)



On a positive note “Now is the time to transform”

- Golden rule in change management
“Never waste a good crisis”
- Use the intrinsic motivation and knowledge of healthcare professionals:
mastery, purpose driven, autonomy, sense of urgency and community
- Strong believe that **empowering workforce** through increasing well being leads to **increased performance of the organization.**

**“Never let a good
crisis go to waste”
-Winston Churchill-**





Does wellbeing of staff improve outcomes?

- Other industries
- Organizations with high employee engagement have better customer satisfaction, innovation performance (Google, Southwest Airlines, etc) (Daniel Stein HBR 2021 (oct))
- Healthcare
- Number of staff burnouts negatively affect patient safety (more nosocomial infections, medication errors and patient falling) and also patient satisfaction.(Zixin et al. JAMA Network Open. 2024;7(11))
- Nurse engagement levels significant predictors of mortality rates



We get it, but... how to achieve this well being of workforce?

- What **frameworks** to use to increase well being, engagement and empowerment
- On which organisational **level** to start: bottom-up or top down?
- What kind of **leadership** is appropriate and adds value?
- Does this lead to **quality improvement**?
- What is the **effect** on hospital performance goals?



'Continuous Compassionate Improvement'

Our work bringing together compassionate leadership and continuous quality improvement

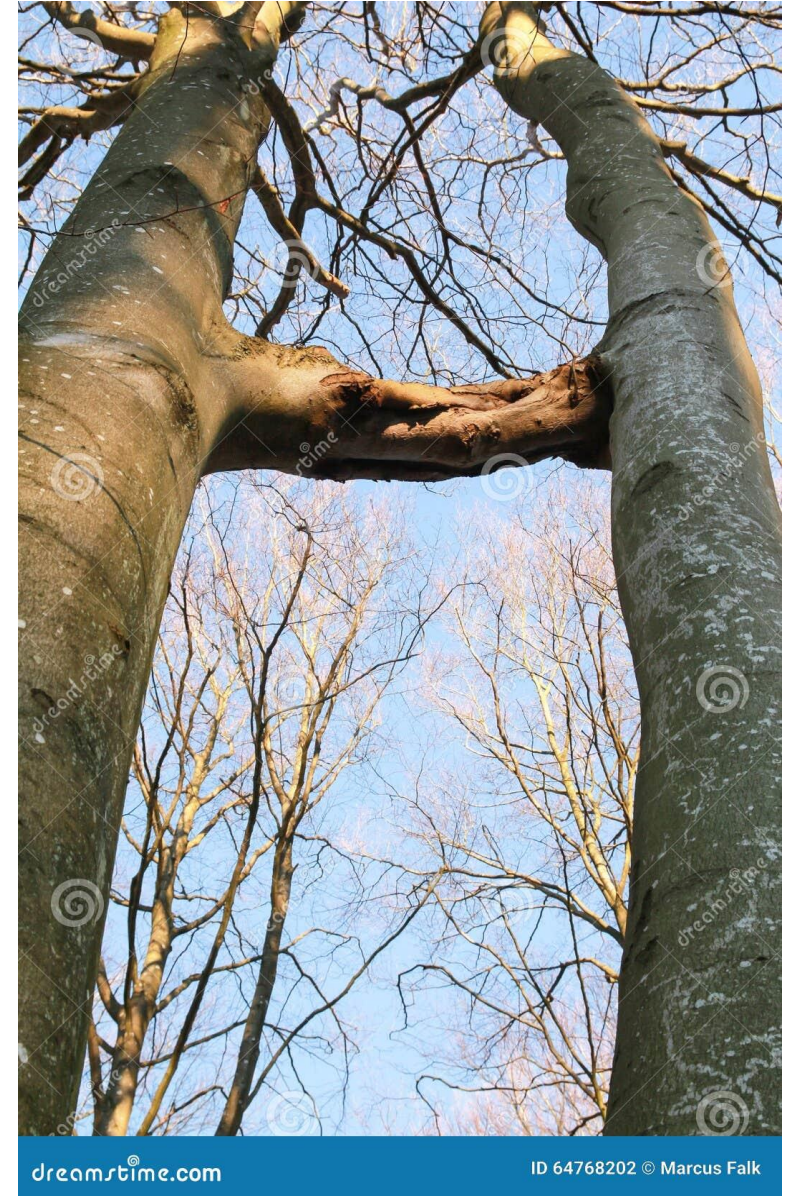
Alistair Thomson, Senior Consultant
Jeremy Cox, Senior Consultant
The King's Fund

The three things we will cover today

The Intersection: The foundation of our work lies in the intersection of pro-social, complexity informed systems thinking.

The Client Context: The reality of their world and what has emerged after embarked on the culture change journey

The Impact: The ripples across the organisation from our work and what we are experiencing whilst doing the work.



The intersection



The client context: the reality of their world

"The C&I programme was a deliberate, strategic intervention we chose to introduce to help provide a framework for our leaders, that in essence comes down to 'how we will do things at UHDB'.

We know that to make an organisational shift, it requires everyone to be aligned and pulling in the same direction - and that's what this programme helps to deliver for our leaders"

Stephen Posey – Chief Executive Officer, UHDB

No silver Bullet: The impact and organisational ripples from our work



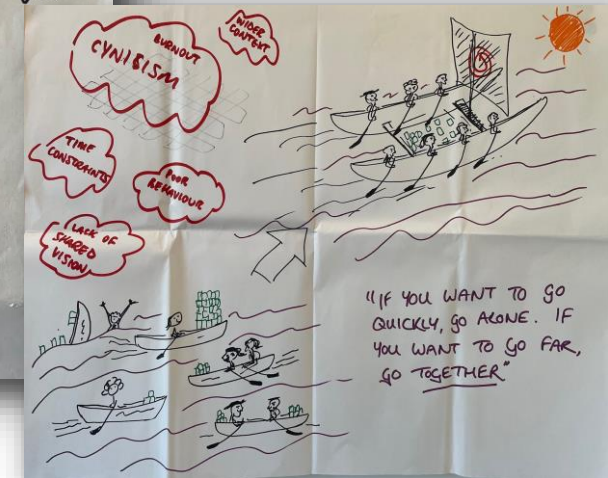
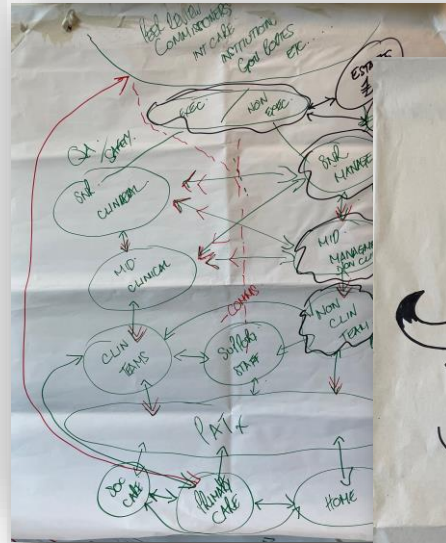
No silver Bullet: The impact and organisational ripples from our work

"While we have further to go, we are starting to see an impact on a micro and larger level. More than 500 of our leaders have started or completed the programme, and this year we will be rolling that out further to our middle leaders.

We want to make leadership and improvement a part of everyone's role, and a part of everyone's day job. This programme has brought leaders from across the organisation into a different thinking space, and I think we will reap the benefits for the years to come with our leaders now and in the future."

Stephen Posey – Chief Executive Officer, UHDB

The point being...



Thank you

Alistair Thomson
Jeremy Cox

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Nurturing Happier Working Lives:

Insights from an improvement approach to well-being at work

Anita DeHavilland

Jeni Malpass

International Forum On Quality and Safety in Healthcare, Utrecht,
22nd May 2025



The Academy of Research and Improvement

Hampshire and Isle of Wight
Healthcare NHS Foundation Trust



We empower staff and patients to drive research and improvement by building skills, confidence, and capability. From training and facilitation to events and our annual conference, we support projects in Research, Improvement, Clinical Effectiveness, Innovation, Patient Involvement, and Evidence Sharing - helping teams turn ideas into impact.



Key Messages



- Building a workplace culture of support and compassion
- Overcoming common implementation challenges
- The power of small incremental improvements

The facts behind the programme



Strong links between safe effective patient care and NHS staff wellbeing and engagement.

(Micheal West – The Kings Fund)



Fewer patients die if staff are happy and engaged.

The kings Fund found that for every 96 patients who die in hospital with highly engaged staff, 103 die where staff have low engagement



More control over your work makes you healthier.

A study of over 10,000 civil servants showed that how much control you have, and how much opportunity there is for participation is for social participation, profoundly affects the health of individuals.



Companies with happy and engaged employees have 70% fewer safety incidents.

(Gallup)

Robin Davis

Director, NHS Elect



What the programme looks like

Day 1 Diagnosing

- Evidence behind HWL's
- The model for improvement
- Framing your vision
- Engaging with colleagues
- Different perspectives
- Tools for measuring happiness

Day 2 Problem Solving

What has the evidence shown you

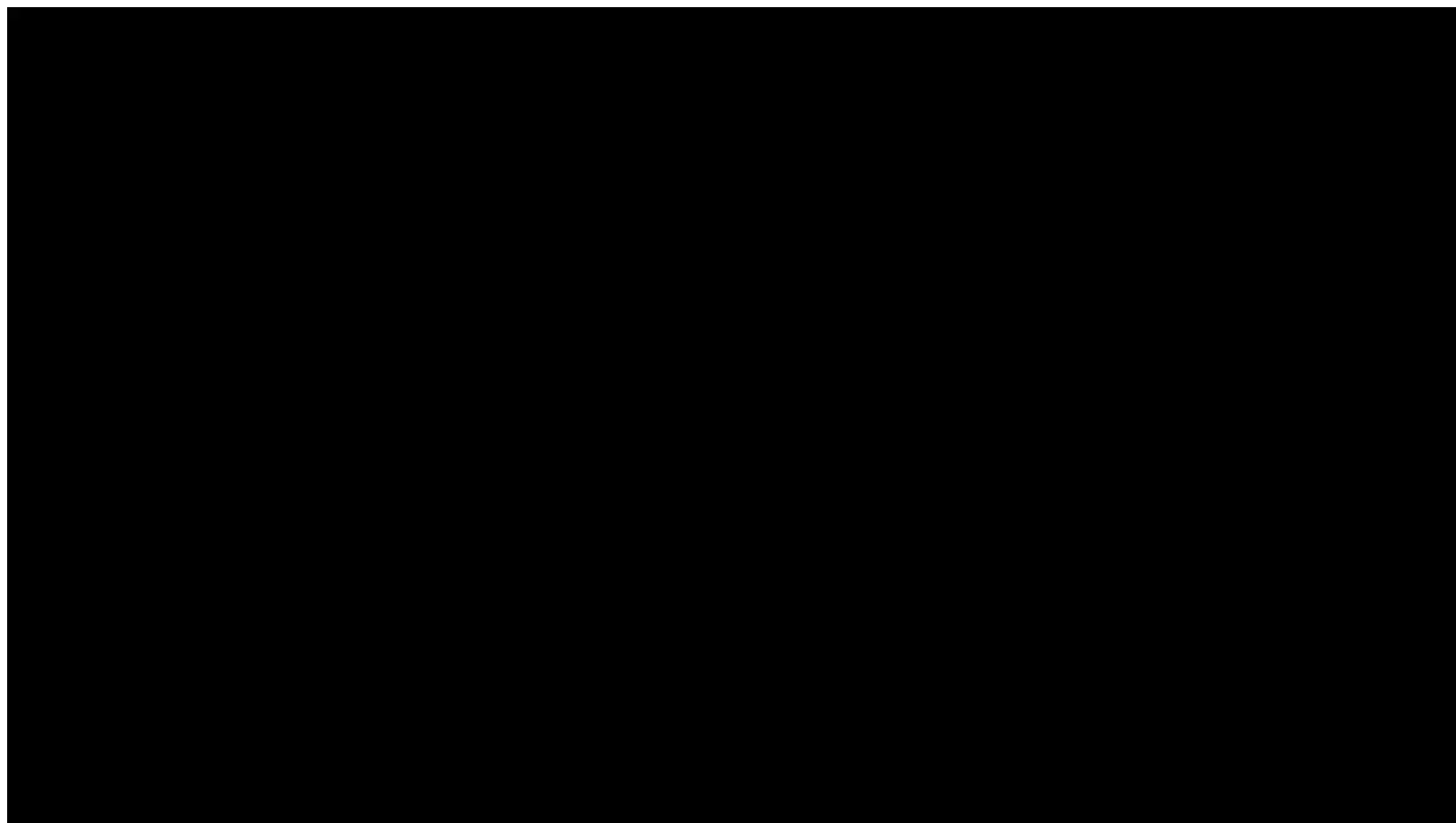
- CIA Model
- Making plans/Change ideas
- Creative thinking
- PDSA
- The power of gratitude's

Day 3 Making and Sustaining Improvements

- 15sec30mins concept
- Civility saves lives
- Making things stick
- Importance of teamwork
- Looking after yourselves
- Sustainability

Sian Lloyd-Jones

Side-by-Side Member



The Tools

Hierarchy of wellbeing needs:

- What matters to you
- Rate your day

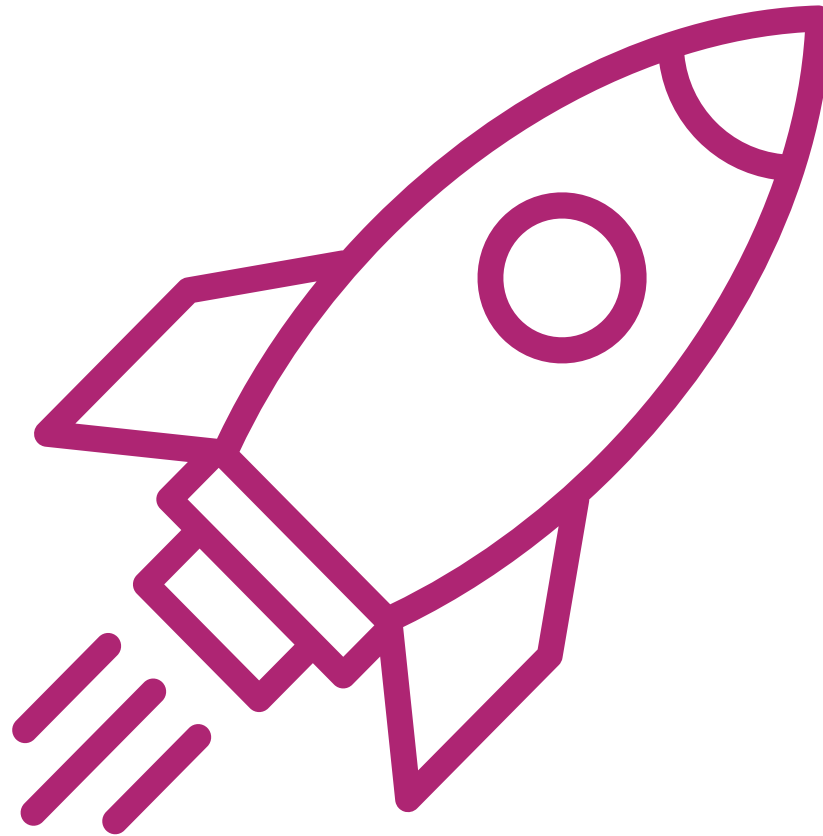
IHI Conference – Rate your day



Let's see the results!



It's not rocket science!





HLOW Initiative

- The garden project
- Commandeered green space outside office
- Seed donations from local garden centre
- Tree from the NHS Forest scheme
- Used for breaks
- Used get away for a few minutes

HIOW Initiative

- Never ate lunch together
 - Changed clinic times
 - Now everyone has lunch at the same time
-
- No staff/break room
 - Staff ate at their desks and continued to work
 - Now everyone pauses for lunch
 - Phones are on hold, and answered post lunch



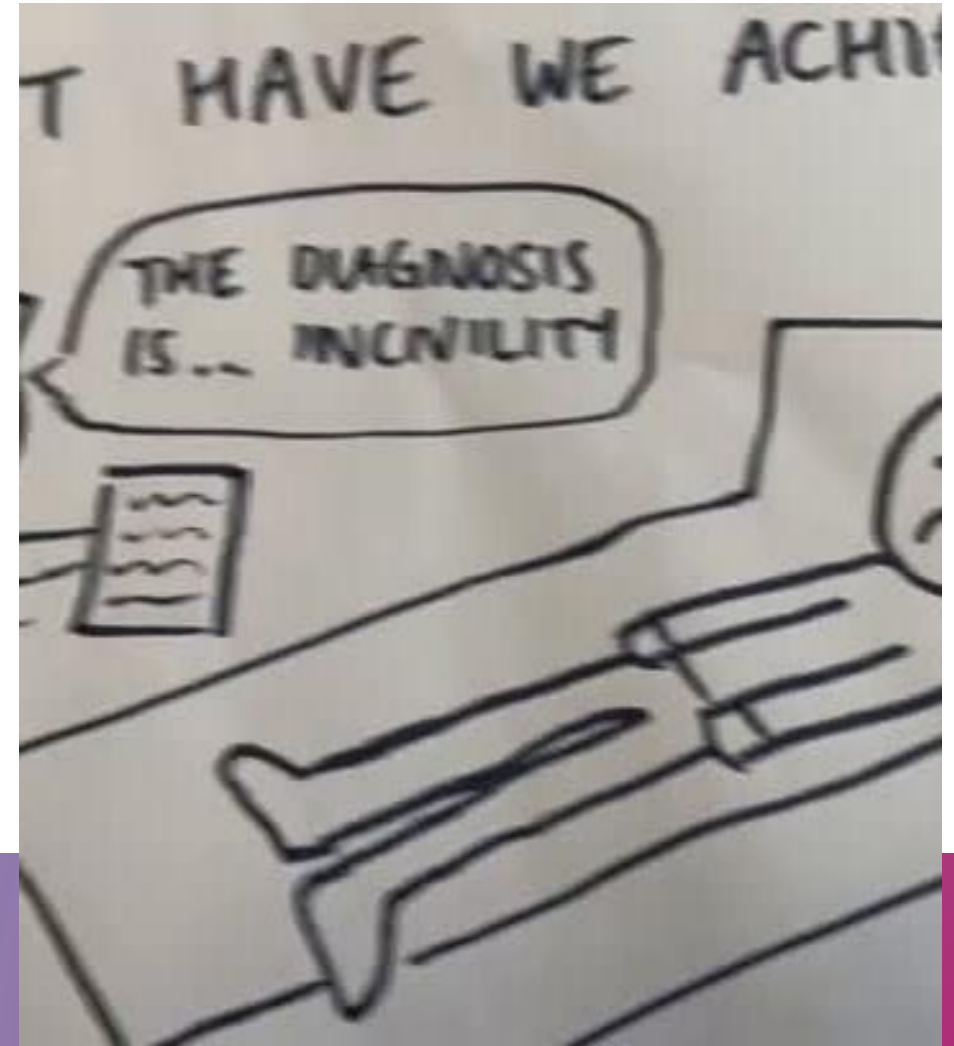
Feedback is essential, to see the impact of HWLs.

We do this in several ways



Teams are asked to create a video on the last day based on three questions

1. What have you achieved?
2. What have you learnt?
3. What were your favourite bits?



Speech and Language Therapist

What did you implement from
HWL? Is it still in place?

The first thing we implemented was a gratitude & grumble Padlet for staff to fill in, information is collated monthly and cascaded to the team.

We have four wellbeing afternoons on an annual basis. Staff are encouraged to have more time out to get together, for example walks, having lunch together.

Check ins at the end of the day or after appointments.

What have you implemented post HWL?

We are now focusing on the managing workload aspect of our driver diagram.

We have included Admin in our wellbeing meetings.

Have met with senior managers and looked at how they can support the team to meet their targets.

Prompted a session to look at team objectives which has now been cascaded down to our appraisals, meaning the whole team is aware of what work is happening.

Looking at improving office environment, for example lighting

Now have a wellbeing slot in the hub meetings.

Staff have been asked to create their own profiles around what helps them to thrive, helping each other to get to know each other better.

On reflection what have you taken
away and how has this influenced
your work?

The programme gave you loads of ideas for change and helped us to make wellbeing a priority, as it provided us with the evidence of why it is so important.

It gave us permission to be wellbeing aware.

Empowering colleagues to be kinder to themselves by having a lunch break or taking a walk.

Hearing from the other teams and what changes they were putting in place.

Is there anything that you would like
further support with?

Keeping us up to date with wellbeing information, especially from NHS Elect
Is the Academy aware of any funds they use for wellbeing purposes.

What venues are you are aware of that are cost effective.



Rapid Evaluation

At it's core:

- Engagement
- Flexibility
- Speed

Accessible, responsive, applied

A rapid evaluation of Happier Working Lives as
delivered in Solent NHS (National Health Service) Trust

Jennifer Malpass, Anna Badley, Dr Sarah Williams

Theme 1: Juxtaposition of permission

- A Changing of the tide – permission to priorities staff wellbeing
- A Welcome step away from prescribes initiatives
- Balancing costs and priorities



Theme 2: Harnessing the potential of small change

- Nurturing relationships
- Fulfilling the fundamentals
- Small actions making the biggest difference
- Improvement by stealth



Theme 3: Unleashing the team

- Driving changes needs leadership support
- Navigating the wider team dynamics
- Team diversity
- Helping teams who want to change to thrive



Theme 4: The Transformative Journey

- The art of science of external facilitation
- Time: a hurdle and a catalyst
- Perspective pioneers
- A springboard for positive change



Evaluation – key learning

- Empowerment through leadership & support
- Impact of small changes
- Value of diversity and collaboration
- Protected time for reflection

LESSONS
LEARNED



They said we did

Community of Practice Share & Care



- Teams wanted to know what the others had implemented within their and subsequent cohorts
- Quarterly meet ups now in place

Buy in from Managers



- Teams expressed that managers were not always on board
- Managers are now invited to the preparatory sessions, they now hear the expectations of the teams

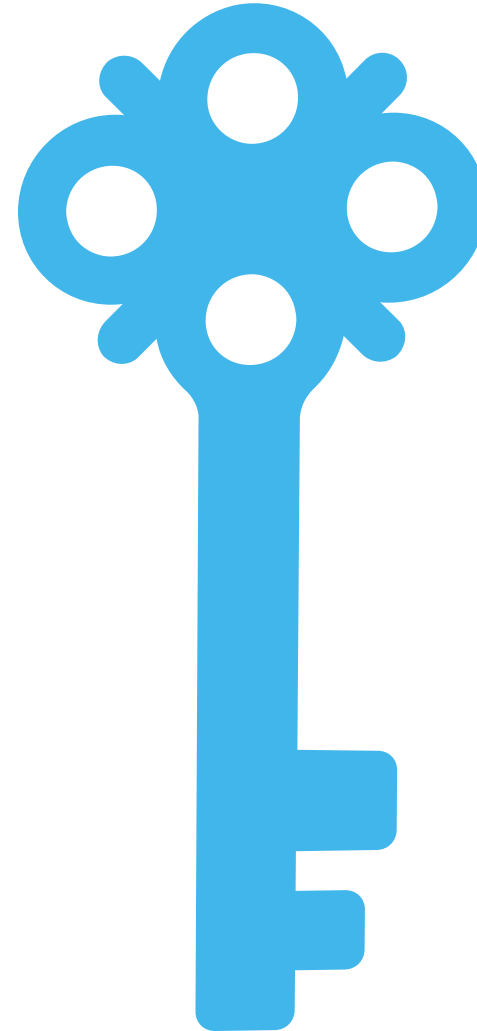
Ways of engaging teams



- Teams expressed they couldn't remember all the activities that were featured in the programme
- Teams wanted to find new ways of engaging teams
- Do you remember emails now sent as a refresher and detailing new ideas

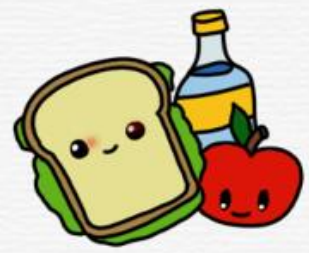
Key Messages

- Building a workplace culture of support and compassion
- Overcoming common implementation challenges
- The power of small incremental improvements





KEEP HYDRATED



LUNCH AWAY FROM DESK



USE YOUR VOICE



SHARE YOUR FEELINGS



TAKE REGULAR BREAKS



GO FOR A WALK



GO HOME ON TIME



ORGANISE YOUR WORK



ASK FOR HELP



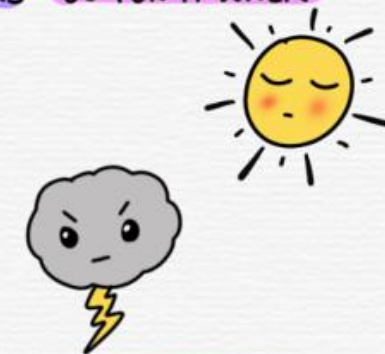
DELEGATE MORE



KEEP COMMUNICATING



SEND LESS EMAILS



WALK AWAY FROM CONFLICT



TAKE DEEP BREATHS



REFLECT ON YOUR DAY



TAKE YOUR TIME



FOCUS ON SUCCESS



ASK CURIOUS QUESTIONS



HELP EACH OTHER



BE CLEAR



TREAT YOURSELF + OTHERS



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Deliberately Developmental Healthcare: A way to prevent burnout?

Marie Storkholm, MD, PhD

Head of Department OB/GYN

Regionshospital Horsens

Grow Everyone Everyday

Objectives:

- To share a story on creating a growth culture (2018-> now)

Insights:

- Working with Edge, Groove and Home creates Joy in Work and reduces burnout
- A Growth Culture is rewarding and challenging





No lack of midwives or nurses at this department.
Here is how they get around the bureaucracy

Hospitals and health professionals are under historic levels of pressure, but at the regional hospital in Horsens they've found a solution.

By Nanna Schelde, for Zetland.
Translated by Gordon Roberts.

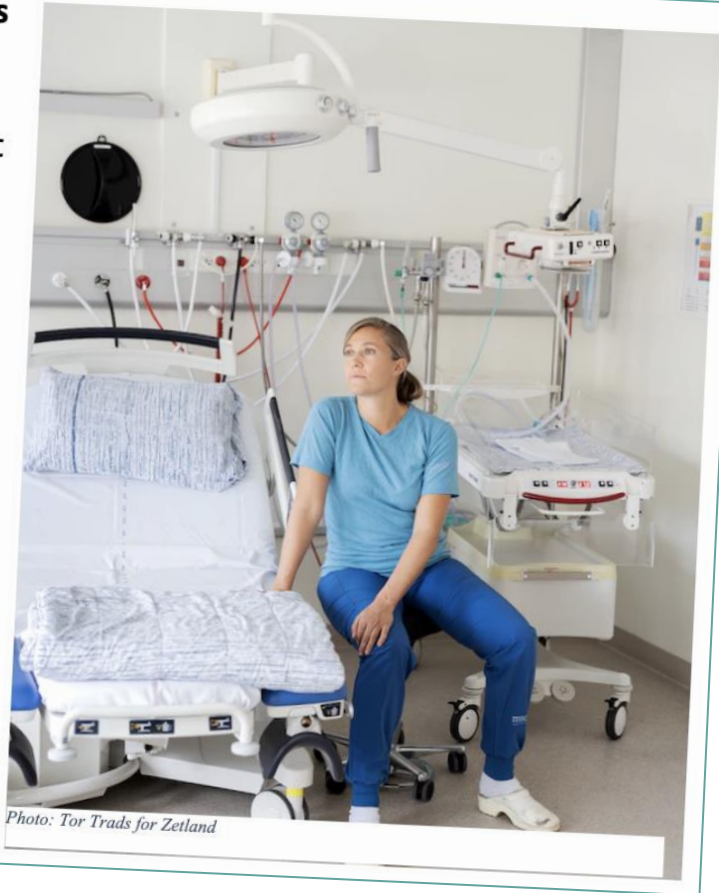


Photo: Tor Trads for Zetland

Burnout	
2019	18,0%
2023	14,1%
2024	9,4%



25% reduced CO2-footprint

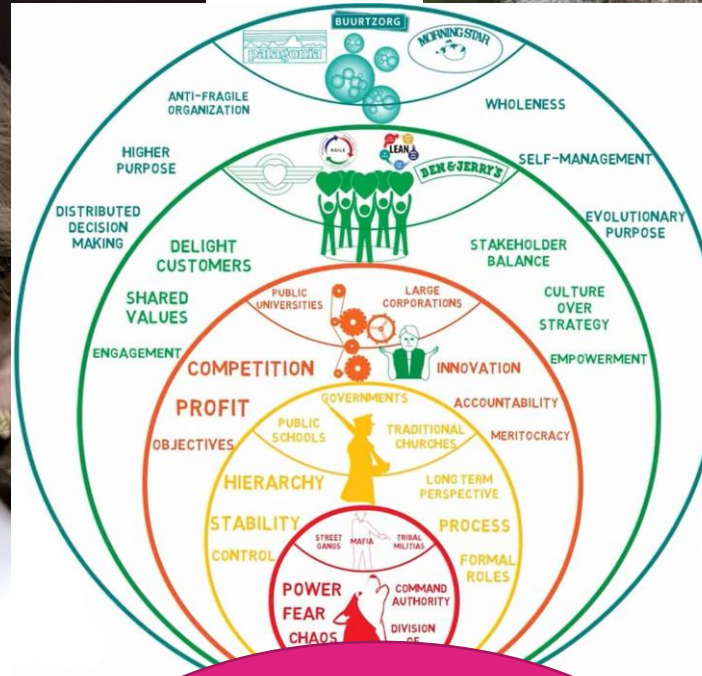
OB-GYN			
Sick leave : Last 12 month.	Regional hospital Horsens	Regional hospital Horsens	Central Region Denmark
Sick leave	4,1% / (10,7 days)	5,0% / (12,8 days)	5,2 % / (13,5 days)

Putting theory in to practice

Fearless
organizations
Edmondson

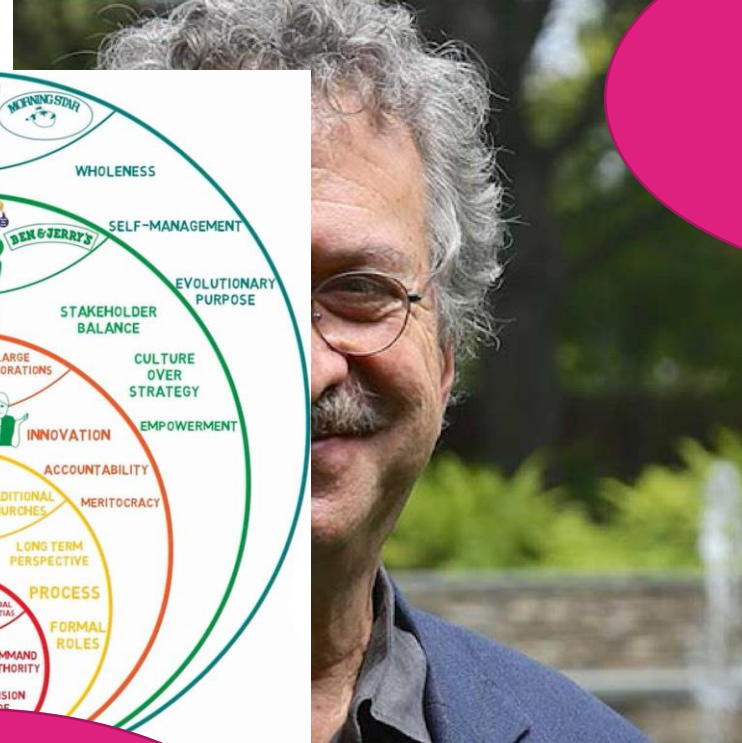


Amy Edmondson Prof. leadership and management, Harvard University



Reinventing
organizations
Laloux

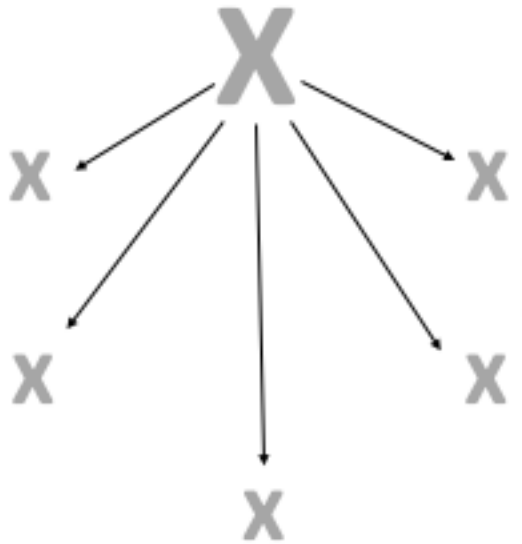
Deliberately
developmental
organization
Kegan



of. in adult learning and professional
t, Harvard University

Deliberately developmental organization (DDO)

- Grow everyone everyday

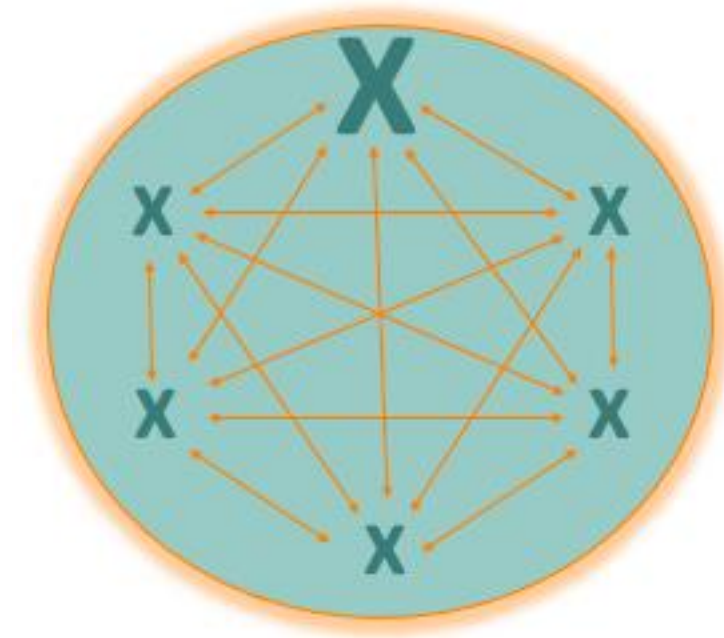


Traditional organization

"high potentials"

Individual coaching and off-site workshops

At special times



Deliberately developmental org.

Everyone

Together at work

Every day

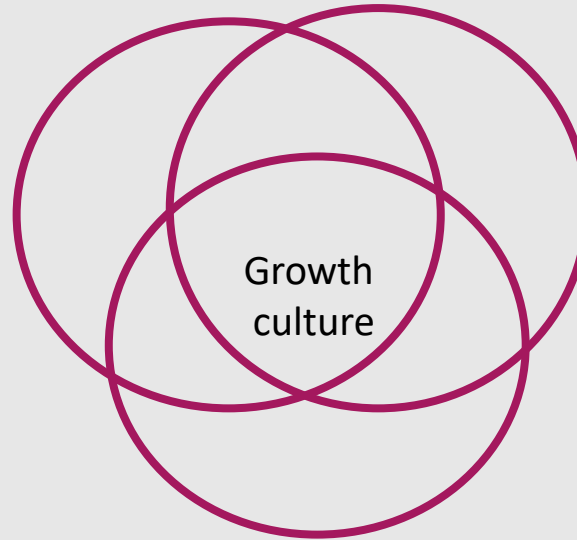


Prof. Robert Kegan
Harvard University



Dimensions of DDO

EDGE
Challenge side
of development



GROOVE
Habits and practices
of development

Trust is key –
we share
responsibility

HOME

1. Appreciating the self
2. Psychological safety
3. View of conflict
4. View of Authority
5. Vulnerability and openness



Wholeness

Acknowledgement of the “2. job”

- Taking of the mask

To be “seen and heard” engages

Do our real job

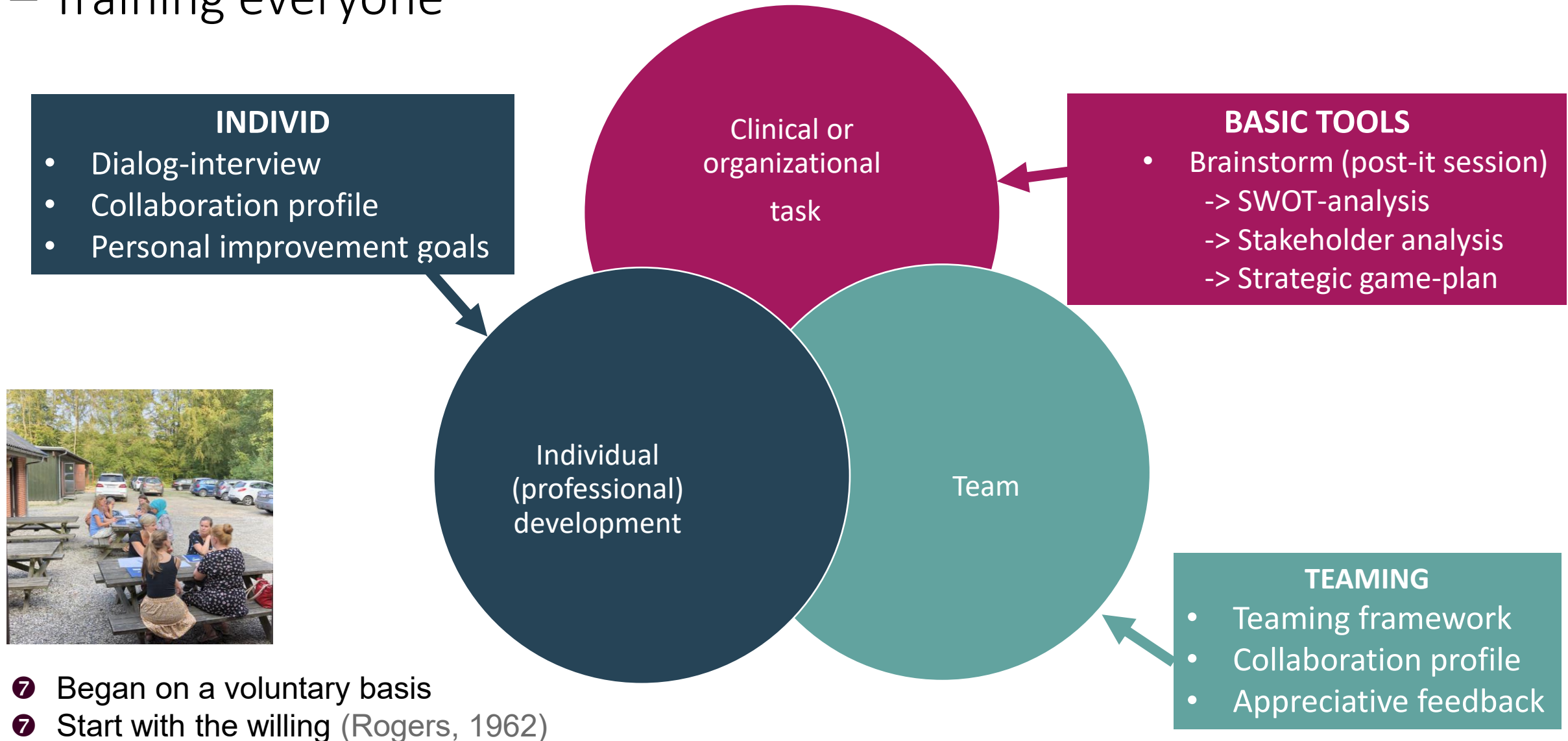
- We have our clinical knowledge and skills
- AND collaborate well
- AND develop healthcare for the future

EDGE

Laloux and Kegan

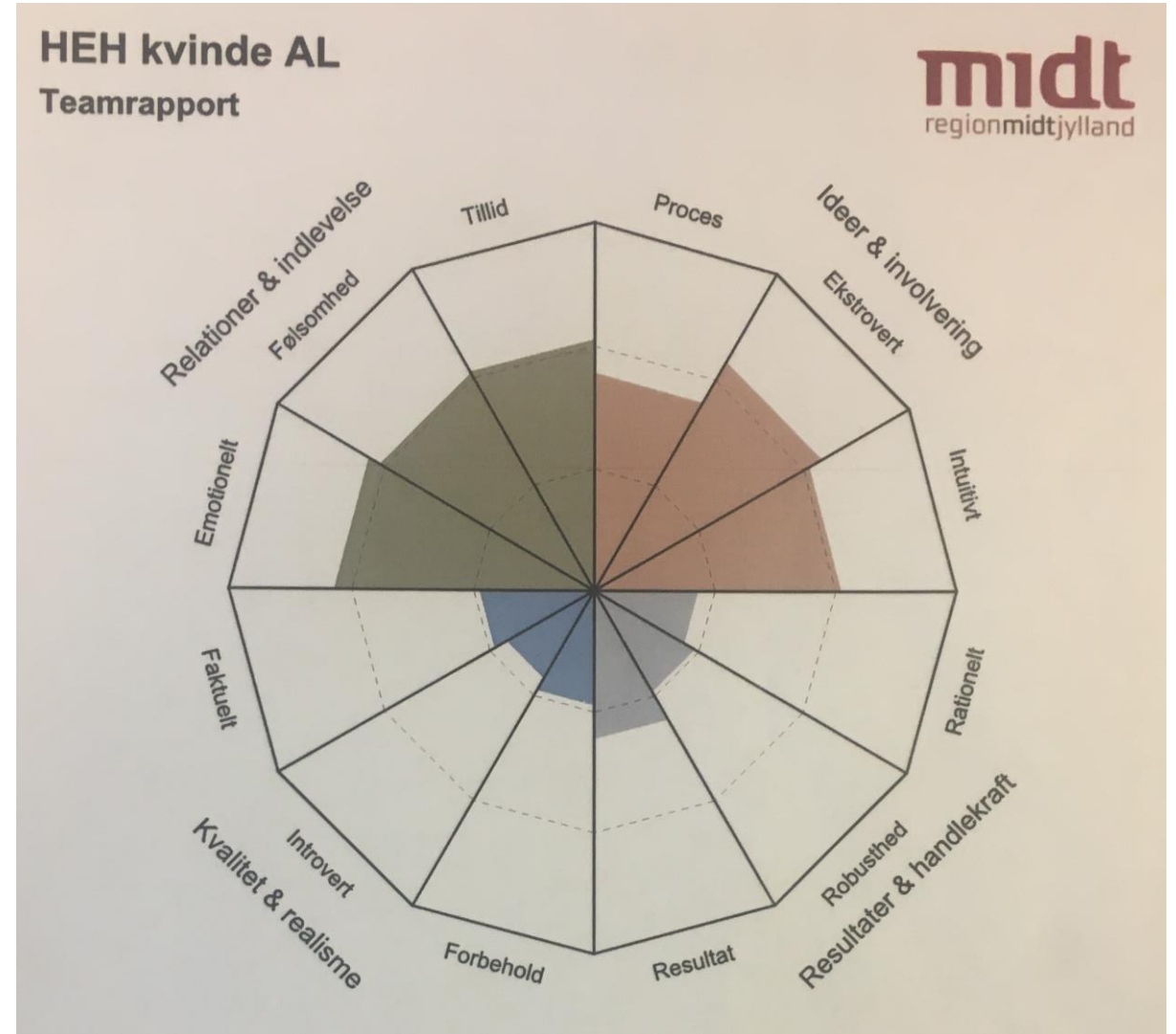
12 Camps – 55 improvement teams

– Training everyone



Team profiles

- Diversity is a Strength



GROOVE: TeamTalk

– A tool that supports psychological safety

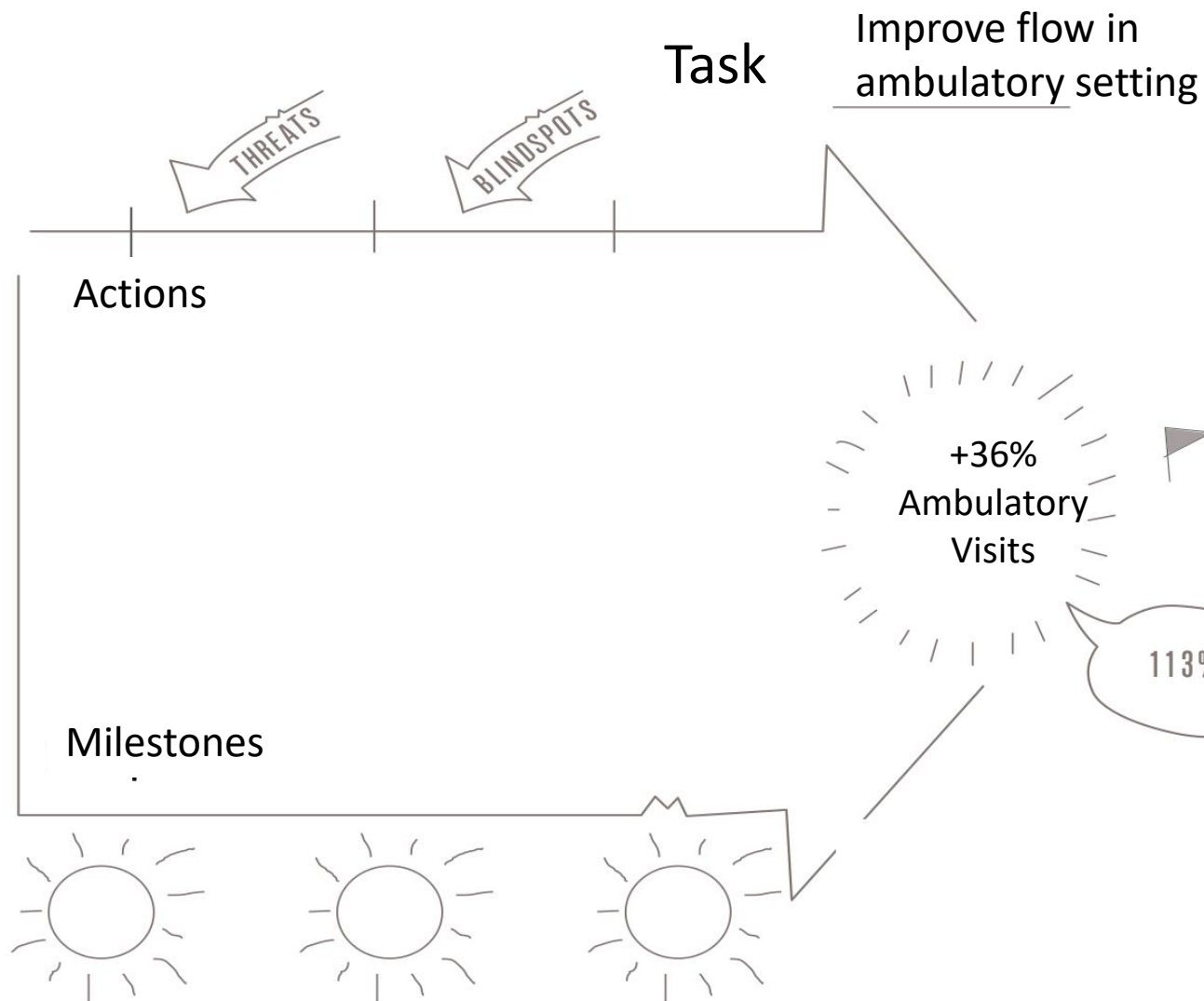
TEAM-TALK

1. What did we do?
2. What worked well?
3. What could be done differently?
4. What did we learn?



GROOVE:

– Strategic Planning in teams



Urogynecology team

Responsible for:

- Operations management
- Booking and ambulatory programs
- Quality indicator and database
- Clinical development and collaboration
- Work environment
- Patient communication
- Strategic planning

What have we changed?

TEAMS

1. Self organizing clinical team
2. Wellbeing team
3. Project teams

PERSONAL PROFESSIONAL DEVELOPMENT

1. Collaboration profiles
2. Personal Improvement goals
3. Basic skills in TEAMING and development work

LEARNING AS WE GO

1. Everyone attend camps
2. TeamTalk
3. Check in 's
4. Surgeon as team leader
5. Feedback
6. Storytelling and SoMe

QUALITY IMPROVEMENT

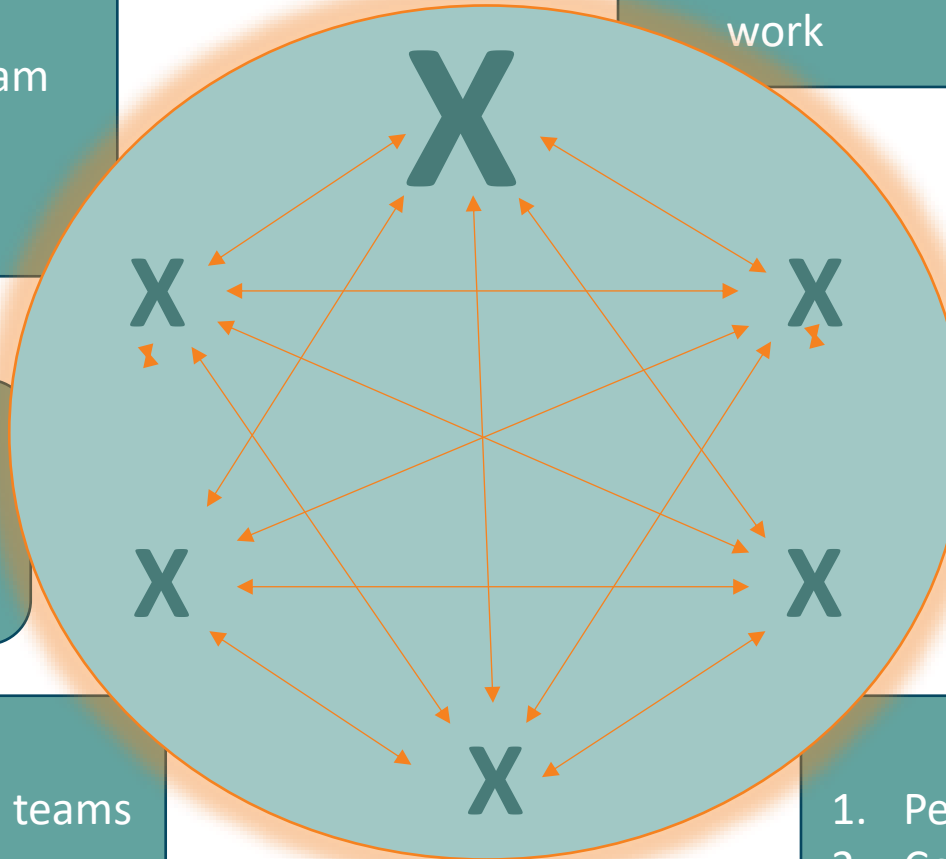
1. Staff as project leader
2. No QI staff – dividing the hours

MEETING PRACTICE

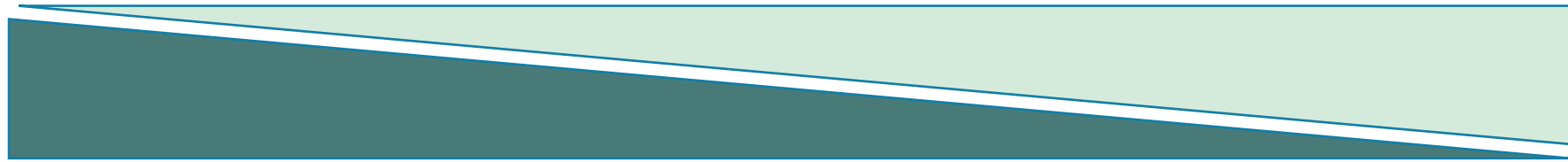
1. Frequent short meeting in teams
2. Team strategy

LEADERSHIP DEVELOPMENT

1. Personal profiles and strategic meeting
2. Coaching, facilitation negative capability



Leadership challenges....



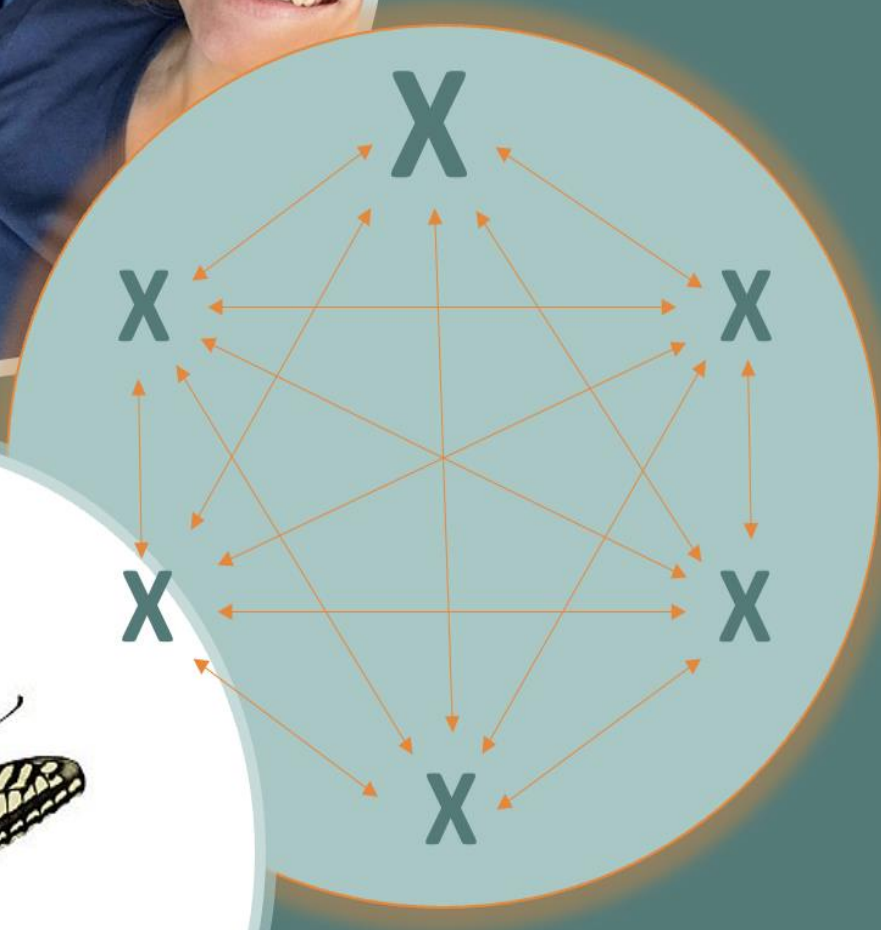
Top-down leadership

Self-organizing

Leaders	Staff
Letting go of control	Taking on the responsibility
Not knowing everything	Stop asking for permission - for everything
Role modeling during pressure	Conflict management
Negative capability	Work-life balance
Prioritization of initiatives	Personal leadership

**Patience and
prioritizing time**





Key Take Aways

In this department, we have experienced improved wellbeing:

- Team with broad responsibility and influence
- Competency development with focus on collaboration and adaptive thinking
- Structures that support learning in everyday work
- One size doesn't fit all – Diversity is a strength
- Wholeness as the “secret sauce”



*Banbrytande
ledarskap*

Podcast

Curious to learn more?

Marie.storkholm@rm.dk