



One day session. Delivered face to face or virtually.

Multiple learning methodologies used including videos, real-life case studies, group discussions, and small group work, dynamic slides, personal accounts and indepth exploration

Patient and Staff Involvement in Learning from Patient Safety Incidents

Applying Being Open, PSIRF and Duty of Candour with rich learning responses and psychological safety

NHS
FRAMEWORK
APPROVED
TRAINING

Facilitated by:

Carolyn Cleveland Founder and Director of C & C Empathy Training Ltd (CCET)
&

Peter Walsh Former CEO of Action against Medical Accidents (AvMA)

Both Carolyn and Peter have worked with multiple healthcare providers, NHS England, NHS Resolution, regulatory and government bodies and public servants.

Patient and Staff Involvement in Learning from Patient Safety Incidents

Applying Being Open, PSIRF and Duty of Candour with rich learning responses and psychological safety

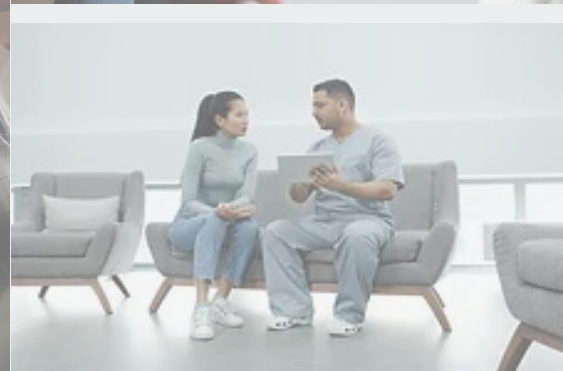
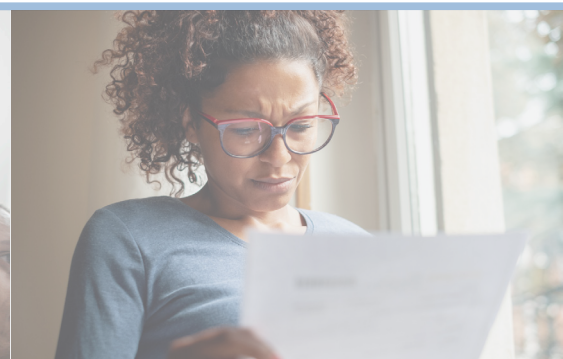
Who you would be working with



Carolyn Cleveland is the Founder of C&C Empathy training. Carolyn has a background in psychology and counselling, and conceived C & C Empathy Training from her direct experience of compassionate communication failure and openness in a healthcare incident and inquest process. Carolyn uses her thought provoking LEED Communications Programme® to develop long term change by humanising processes and empowering staff to recognise the emotional component in themselves, others and complex systems to support patients loved ones and colleagues. Carolyn works with multiple healthcare organisations and public services, NHS England, NHS Resolution, NHS Education, coroners and legal teams.



Peter Walsh was chief executive of Action against Medical Accidents (AvMA) for 20 years until he retired at the end of 2022. He advised on the development of Being Open guidance; led AvMA's campaign for a duty of candour; has advised the Department of Health and CQC on the duty of candour; and contributed to the development of the PSIRF guidance. He is now a freelance consultant and trainer; continues to write and speak on the subjects of patient safety and justice; and is a WHO patients for patient safety champion. Previously, Peter has been a member of the national advisory board on patient safety; and advisor to Don Berwick's review into patient safety.



Patient and Staff Involvement in Learning from Patient Safety Incidents

Applying Being Open, PSIRF and Duty of Candour with rich learning responses and psychological safety

Session Description

This one day session not only examines the Being Open and PSIRF principles around compassionate engagement and involvement, but digs deeper, taking the learning around rich communication and honest understanding out of the textbook and into real life application. Through unique and thought provoking material these principles are brought to life to understand and explore in a psychologically safe and supportive environment - not just what needs to be done to 'comply'. It deals with how it is best accomplished; but also why it needs doing, making all important connections between emotional, human and systems focused learning. By sharing the felt experience of compassionate engagement and involvement, the exploring the psychology behind it and its practical application, those attending will be able to truly put themselves into the positions of others, analysing, synthesising and exploring the complexities of healthcare incidents and emotional fallout. Building confidence of the application of the duty of candour and PSIRF, whilst providing and evidencing compassionate communication and emotional support, to be best placed to have a systems approach and ensure staff, patient, families and carers do not end up more harmed, and rich learning takes place.



Learning Objectives

- Understand and feel the emotional complexities within incidents for patients, families, carers and staff, by exploring the emotional component to aid authentic understanding and rich learning responses
- Understand the fuller picture, around incidents, communication and conflict, using an enquiring and empathic mindset for systems thinking to recognise how we all see things differently and how the 'Funnel of Life' can be part of the system and human factors, impacting on how we make someone feel and communicate.
- Develop understanding of how our emotions, unconscious processes and systems, influence outcomes,
- Build confidence in compassionately engaging and involving those harmed, bereaved, or experiencing a trauma response, exploring how you review whether you have done this well and evidence it
- Gain deep understanding of psychological/second harm for patients, families, carers and staff; impacting on a just, fair and learning culture and preventing meaningful compliance with the Being Open and PSIRF principles
- Understand the duty of candour and PSIRF are so important for patients, families, carers, staff and organisations
- Clarify 'grey areas' within the duty of candour and common difficulties
- Understand what is needed to comply with the duty and PSIRF, with focus on compassionate engagement, and how systems thinking and human factors impact on proportionate responses and investigation
- Link the human side of compliance and guidance and the importance of authentic compassionate engagement, involvement and openness, and what constitutes a meaningful apology to support trust, healing and partnerships and staff well-being

PROGRAMME: Patient and Staff Involvement in Learning from Patient Safety Incidents

Training session delivered using multiple learning methodologies including videos, real-life case studies, group discussions, and small group work, dynamic slides, personal accounts and in-depth exploration.

09:00 - 09.30 Arrival and Introductions

09.30 - 11.00 Session 1: Effective involvement of those affected by a patient safety incident throughout the incident response process to ensure a thorough and richer learning response:

Part 1: The emotional component behind the facts: Founder of C&C Empathy Training, Carolyn Cleveland, will present an insightful, thought-provoking, personal narrative, highlighting the presence and absence of compassionate engagement and involvement and the link to empathy and emotional awareness. The scene will be set to start to recognise the importance of the Being Open principles.

Part 2: Understand the complexity of emotions, perspectives and systems - the science behind our behaviour, communication and outcomes
Delegates will start exploring the world from the 'inside out' as well as within systems, the 'Funnel of Life' and the systems funnel. What are the emotions behind the incident, interactions, environment, behaviours and communications? What is everyone really seeing?

Part 3: Seeing the bigger picture, and using an enquiring mind. How in reality do we all see things differently and catch emotions, ideas and attitudes from others. Delegates will explore how systems thinking takes using an enquiring mind to ask the questions that provide insight and learning. How does empathy lead to compassionate engagement?

15 MINUTE BREAK

11.15 - 13:00 Session 2: Effective communication including dealing with conflict and difficult conversations, applying Being Open and PSIRF Engagement principles.

Part 1: Actively listening and emotionally supporting staff, patients, families and carers to prevent psychological harm

Lead by Carolyn, delegates will identify the difference between sympathy, empathy and apathy and how a lack of empathy has the potential to prevent compassionate engagement and involvement negatively impacting on those impacted by an incident

Part 2: Examining real-life video case studies, this program will delve into natural biases, unconscious thought processes, and systemic factors. Participants will gain insights into recognising the repercussions of a lack of compassion in interactions, understanding how it can lead to enduring psychological harm, and its subsequent impact on professional relationships and learning. The focus will extend to exploring essential considerations: What is being felt? Where the necessary elements? How can we establish psychological safety for both staff and the individuals involved, including patients, families, and carers?

13:00 - 13.45 BREAK LUNCH

13.45 - 15:30 Session 3: Applying Being Open, the Duty of Candour and PSIRF recognising in the context of complex systems and human factors

Part 1: Understanding Being Open, the Duty of Candour and PSIRF guidance

Peter Walsh will explain the context of the Being Open and PSIRF guidance and the duty of candour, exploring 'grey areas' and elements which are most commonly misunderstood or missed; what matters most to patients & families; and practical approaches to meeting statutory requirements, whilst communicating and engaging compassionately and professionally within the guidance.

Part 2: Some case studies

Using real examples, Peter and delegates will work through case studies, exploring the difficult judgment calls required for compliance and achieving good practice in the context of systems thinking and human factors.

BREAK 10 minutes

15:40 - 16.45 Session 4: Recognising meaningful and compassionate apologies to go beyond words but convey authentic understanding of the felt experience

Part 1: Communicating learning and openness in apologies and keeping it personal.

Peter will explore the components of a genuine apology. Carolyn will then conclude her narrative, focusing on non-verbal communication within apologies, and the emotional component being met, as well as the importance of a Safeguarded Personal Resolution®. This session helps professionals to understand the deeper message behind 'I don't want this to happen to anyone else', empowering them to embed the 'personal' into responses and interactions, learn lessons and prevent second harm.

Part 2: Staff well-being and the importance of it in supporting colleagues, patients Families and carers

This session will draw together the vital importance of self care and its relation to empathy and compassionate engagement long term to guard against compassion fatigue.

16.45 Close and further questions Please note a learning narrative runs throughout the day and concludes in the last session



Delegates attending will be issued with a certificate of attendance plus self-reflection documents for CPD and a follow-up support email.

Testimonials and Feedback

"Carolyn led a session for a group of Senior Clinical Leaders at Northumbria Healthcare on Empathetic Leadership September 2023. The session was so powerful and engaging with an open and honest account of personal experience that deeply impacted the group. The various formats of delivery and the consistent patient story running throughout the day made this an extremely reflective session.

I was there to help facilitate the day and it was the first time I had had the opportunity to hear Carolyn's session. As the Director of Patient Safety and lead for the implementation of the Patient Safety Incident Response Framework (PSIRF) I saw the direct correlation that this session had with the compassionate engagement and involvement element of PSIRF. I would highly recommend Carolyn's training, not just in relation to PSIRF but as a standard for empathy and compassionate engagement for all healthcare staff, particularly those who are responsible for responding to incidents, complaints and claims."

Rachel Carter, Director of Patient Safety, Northumbria Healthcare Foundation Trust

Following careful consideration of the right provider for us, the Trust commissioned Care & Compassion Empathy Training to provide a programme of training looking at compassionate responses to complaints and incidents. 6 sessions were arranged for to support understanding of the emotional component for all involved and the need for psychological safety within communication and processes to avoid prolonged psychological harm (Duty of Candour) and second harm. CCET and Carolyn were extremely flexible given the changing picture in relation to Covid restrictions still, initially agreeing to deliver face to face, onsite at 2 of our sites and then adapting the training to allow it to be delivered online.

CCET worked with us to establish the exact requirements of the session and target the group of staff with information that was specifically relevant to them. This resulted in CCET providing a tailor-made session to our organisation. This included brochure design and flyers in advance and both digital and hard copies of all supportive training material. Follow up support was provided to discuss any outstanding or sensitive issues that arose and the feedback from our staff was outstanding. CCET collated that feedback for evaluation but also amended future training based on the commentary provided. In summary, I would have no hesitation in recommending to any organisation that they consider CCET and Carolyn as a provider of their Compassionate engagement and Empathy training.

Gregory Hope, Deputy Director of Quality Governance at Liverpool University Hospitals NHS Foundation Trust

Example comments of overall impression of the course:

- The course was delivered in an excellent way, with the right levels of humanity, humour and academia. The stories and video examples made the topic very real, kept me interested and will be very valuable to me*
- I have done a lot of training and heard many family stories as videos and podcasts, but to make it the theme of the day deepens the patients/families voice at the forefront and reminds us of why we do the jobs we do*
- It was an excellent day – both the practical by Peter and the psychological/personal by Carolyn. I am very grateful for them both doing this to improve the way the NHS works with families when things go wrong.*
- Very relevant content and well-pitched by both presenters in a most engaging and relatable way.*
- Such a great course. The content was very relevant, all questions were answered fully and openly and the session was very thought-provoking and engaging.*

Example of things delegates would do differently

- Acting more confidently but also with more awareness of the emotional aspect, especially where families express themselves strongly, because they are likely not feeling heard.*
- Asking if I have captured/understood everything, inviting further communication and making sure to mirror words.*
- Focus more on people/patients/staff 'hearing my words but feeling my attitude' and the impact this has on their experience and outcome of difficult situations*
- Considering the patients, families and carers should be viewed as a partnership in their resolution identifying what THEY need to support their closure and learning*