

## CRITICAL COMMENTARY

### ‘Practice development is a way of being.’ Looking back on the 2018 Enhancing Practice Conference in Basel, Switzerland

Diana Staudacher\*, Kathrin Hirter, Heidi Petry, Irena Anna Frei

\* Corresponding author: University Hospital, Zürich, Switzerland  
Email: [diana.staudacher@usz.ch](mailto:diana.staudacher@usz.ch)

Received for publication: 22<sup>nd</sup> October 2018

Accepted for publication: 23<sup>rd</sup> October 2018

Published: 14<sup>th</sup> November 2018

<https://doi.org/10.19043/ipdj.82.012>



ALL PHOTOGRAPHY: VERA ZURBRÜGG, VERAZURBRUEGG.COM

‘Healthy workplace cultures – better care for patients’ - this was a key message of the 2018 Enhancing Practice Conference, highlighting the complex interrelation between leadership, culture and human flourishing. Creating healthy workplace cultures has proven to be an essential condition for practice development and person-centred healthcare. Leaders striving to achieve high-quality care should ensure the wellbeing of healthcare professionals. In a person-centred culture, patients and professionals should feel cared for and supported.

It was a very special moment for the hosts to welcome the international practice development community to Basel on 22<sup>nd</sup> August. For the first time, the Enhancing Practice Conference, under the patronage of the International Practice Development Collaborative, was held in Switzerland, organised by the Practice Development Network of the University Hospitals of Basel, Bern and Zurich. More than 80 workshops, 26 show-and-tell presentations and six keynotes offered a broad access to the conference topic 'leading and facilitating within practice development in healthcare'.

One participant summed up her experience:

*'At this conference, I learned to see nursing with fresh eyes – like putting on glasses and suddenly seeing much clearer than before. I became aware that I really can influence the way we care at my institution. Practice development offers me the methods and instruments to make a difference.'*



She especially emphasised the benefits of the intensive exchange in the home groups, which were reflexive spaces for participants:

*'Coming together every day in the home groups was really a revelation for me. We discussed what we learned from the keynotes or workshops. So all of us could bring in their own experiences. This was really our conference.'*

In accordance with the philosophy of practice development, the intent of the conference was to go beyond providing knowledge. Creative and arts-based approaches opened up a space of

freedom, allowing participants to break with mainstream patterns of thinking and giving free rein to innovative ideas. Furthermore, one of the special concerns of the conference was getting to the roots of the profession's current problems and addressing the social conditions of nursing.

### **Creating 'compassionate' cultures**

In his opening keynote in front of more than 250 participants, Professor Michael West, of The King's Fund in London, warned:

*'We are damaging the health and wellbeing of the very people we ask to deliver the health and wellbeing of our communities.'*

Speaking of the situation in England, Michael told delegates that more than half of the people working in the NHS say they are unable to meet all the conflicting demands at their workplace. Nearly 40% report that they feel unwell due to stress at work. 'We know this has an impact on the quality of care and that it affects error rates [...] and patient mortality,' he said. In his view, the health and wellbeing of nurses are the foundation of high-quality care. A person-centred culture is only worth its name if health professionals feel appreciated and cared for by their clinical leaders. Michael coined the term 'compassionate leadership', to describe the importance of leaders exemplifying compassion in contact with patients, relatives, professionals and colleagues. Leaders should offer an inspired vision of their organisation and be powerfully focused on embodying core values. In a compassionate healthcare system, 'patients and staff would feel supported and cared for.' In his view, one key question can help us to identify leadership quality: 'Psychological safety is essential: do nurses feel safe in their

teams and organisations?’ Evidence shows that employees who do feel psychologically safe are able to express their concerns about errors, near-misses and problems. Staff members able to do this without fear of losing their status can improve current practice; they learn better and achieve better outcomes. In contrast, uncertainty and fear have a paralysing effect.

### Experiencing the dynamics of leadership

*‘Imagine leadership as a dance ...’*

With these words, Professor Brigitte Biehl-Missal, of the College for Popular Arts, Berlin, invited the conference participants to experience leadership ‘not only in a rational way but with their body’. How does it feel to be a ‘follower’? Having to adapt every movement to the leader’s prescription can be discouraging. There is no room for personal freedom and the follower’s own initiative.

‘Kinaesthetic empathy’ is indispensable for leadership, Brigitte said. Leaders should be able to empathise with their followers at any time. They should ask themselves how their behaviour might affect others. So leadership requires, first of all, self-reflection and leading oneself.

The first conference day, focusing on the topic ‘Leading and leadership in practice development’, yielded a clear picture. Professor Kim Manley, of Canterbury Christ Church University, summed it up:

*‘The quality of the clinical leader has a central influence on nursing. Therefore, we should invest in clinical leaders.’*

Leadership that creates a sense of freedom corresponds to ‘facilitation’ as a key principle of practice development. Facilitators support teams and organisations in a cooperative way, based on common values and a shared vision. Facilitating is characterised by teamwork – as Kim said, ‘the teams are the stars!’

### Learning from nature

Nature can offer fascinating solutions for organising human life. Can it also serve as a ‘model’ for creating healthy workplace cultures? This was one of the key questions addressed by Professor Thomas Seeley, of New York’s Cornell University. From a biological perspective, he explained the vital importance of joined-up, coordinated behaviour in dealing with unfamiliar or challenging situations. In nature, hundreds of individuals – for example honey bees – behave like a single organism striving toward a common goal. ‘Collective intelligence’ does not rely on a leader, Thomas said. The community decides in the best interests of everyone, for example ‘by collective fact finding, open sharing of information, vigorous debating, and fair voting’.



Learning from nature as a ‘role model’ was a thread running through the conference’s second day, with the motto ‘Facilitating healthy workplace cultures’. Professor Brendan McCormack, of Queen Margaret University, Edinburgh, mentioned commonalities between workplace culture and natural



eco-systems based on cooperation and interconnection. Taking a close look at natural systems may help to identify conditions fostering an ‘ecology of human flourishing’, Brendan said.

A healthy workplace culture requires a focus on the strengths of employees, creating a ‘strengths-based organisation’, pointed out Grant Kinghorn, of the University of Wollongong, and Semakaleng Hlapane, from the Justice Health and Forensic Mental Health Network – both in Australia. Since healthy workplace cultures are a precondition for high-quality care, there should be more attention paid to this issue. Professor Tracey Moroney, of the University of Wollongong, proposed that workplace culture should already be part of nursing education.

### **‘Flowing between the known and the yet to be known’**

*‘Handing the lantern on to the next generation – keeping the light burning.’*

This beautiful motto, from Dr Sandra Walden, of the Frimley Health Foundation Trust in the UK, echoed the central issue of the third conference day: ‘Facilitating intergenerational person-centred care’. How is it possible to create a climate in which people of different generations, cultures and educational backgrounds feel safe to engage with the challenges of a complex healthcare system? This was one of the main questions asked by Dr Donna Brown, of Ulster University, in her keynote. Appreciating diversity with regard to age, culture, and education is a central characteristic of person-centred practice. In view of highly diversified intergenerational teams, it is all the more important to ensure authentic collaboration based on common values.

The international practice development movement has always kept pace with the times. It is unique through its dynamic, always ‘flowing between the known and the yet to be known’, as Brendan McCormack said in the final keynote. To offer future generations empowering models, concepts and instruments, continuous critical self-reflection is necessary. Practice development thrives on people dedicated to transforming, changing and improving care. However, the focus is not on processes, concepts or instruments but on persons as human beings with unique personalities.

### **Shaping the future**

To shape the future, it is necessary to make visible our goals, ideas and wishes, yet words are sometimes not enough to express these. Therefore, the conference home groups often presented their messages and insights in an artistic or poetic way. This once more confirmed that creative, arts-based approaches are indispensable to practice development. Creating means making something new and different. Imaginations take shape and become concrete. Working creatively encouraged the participants to develop unconventional solutions and to explore new possibilities; thinking became more fluid and flexible.

Every day healthcare professionals are exposed to emotionally challenging situations, as Professor Sally Hardy, of London Southbank University, mentioned. To protect themselves from traumatising, professionals often have to close their ears and eyes, which creates a distance between them and their patients. It decreases openness and sensitivity for others. Arts-based methods can be highly valuable to help staff address these emotionally demanding aspects of their work.



Sally called for 'creative caring' to open up the senses and sharpen perceptual skills. The creative process can also help the processes of self-reflection and personal development. One participant concluded:

*'Change begins within myself. Practice development is not only a method, it's also a way of being. In order to change my professional practice, I always have to reflect and to further develop myself as a person.'*

**Haiku**  
Reflection on the conference by Emma Radbron and Rebekkah Middleton

Context and culture  
Each generation is key  
To create safe spaces

Facilitation  
Transforming swampy lowlands  
Sun shining on others

In swampy lowlands  
Changing behaviors is key  
Conscious of doing

Knowing self, being  
Encourage reflective talk  
Am I tenacious?

Yes, keen for success  
Provide authentic support  
Facilitation

A way of being  
Psychological safety  
Context and culture

Boomers, X & Y  
How do we share our values?  
Letting go, to come

**Dr Diana Staudacher** (DPhil), Scientific Assistant, Nursing and Allied Health Professions Office, University Hospital Zurich, Switzerland.

**Kathrin Hirter** (MSc Practice Development and Innovation), Facilitator in Practice Development and Innovation, Head Office of Nursing, Medical-Technical and Medical-Therapeutic Areas, Nursing DevelopmentInsel Gruppe, Bern University Hospital, Bern, Switzerland.

**Professor Heidi Petry** (PhD, RN), Head of Center of Clinical Nursing Science, University Hospital Zurich, Switzerland.

**Irena Anna Frei** (PhD, MSc by Research, RN), Lead Facilitator, Practice Development School Switzerland, Department of Nursing and Allied Health Professions, University Hospital, Basel, Switzerland.