



Insights into Developing Caring Cultures: A Review of the Experience of the Foundation of Nursing Studies (FoNS)

Background

'Culture' is the most frequently word used in the Francis Report (2013)¹. Culture influences how care is experienced by patients and service users and whether care is person-centred, safe and compassionate. It also impacts on the maintenance of standards in everyday practice and the extent to which staff feel supported and valued. Whilst toxic cultures are recognised, little attention is given to what a good culture 'looks and feels like'. This review therefore occurs within the context of public questions about the culture of healthcare practice, principally, how do we ensure that the culture enables patients to be at the heart of care? Furthermore, how can staff be enabled to provide care that is underpinned by the 6 Cs (care, compassion, competence, communication, courage and commitment²), and ensure these values are consistently experienced? Consequently, this review, focuses on workplace culture, namely, 'the most immediate culture experienced and/or perceived by staff, patients, users and other key stakeholders' and which, directly impacts on the delivery of care³.

Review Aim and Methods

The aim of the review was to identify what, if anything could be learnt about how effective cultures that are person-centred, compassionate and safe can be achieved and sustained through reviewing the reports of 82 FoNS projects undertaken over the past 10 years. A staged approach was adopted to analyse the project reports, using an impact framework developed from a concept analysis of effective workplace culture³.

Summary of Findings

Using an impact framework to classify 82 FoNS projects, has led to the identification of three categories of projects that can provide insights into developing caring, person-centred cultures and the role of values such as the 6 Cs in frontline workplace culture. Whilst projects with a service improvement typology have been linked to improvements in practice using project management type approaches and evidence based practice, as well as the implementation of other initiatives and innovations, their intention was not specifically to address workplace culture and therefore they did not pay attention to this explicitly. Approaches in this category therefore appear less likely to be successful in embedding and sustaining the initiatives that they focus on. Engagement with stakeholders across the whole project process and particularly at the frontline had been or was lacking.

In contrast, those projects that used practice development typologies, as well as those including action research, frequently intended to address the workplace culture through working with values and beliefs around person-centred care and the patients' experience as well as the attributes of effective workplace cultures. Such projects deliberately used tools and processes to identify and implement values and beliefs and drew on eclectic approaches to facilitate all stakeholders, working together as partners, using the principles of collaboration, inclusion and participation (CIP)⁴ and systematic approaches to evaluation. These approaches appear to be more successful in making changes and sustaining caring, person-centred and effective workplace cultures, to the extent that this can be concluded from documentary analysis alone. The outcomes of projects and certainly those projects that achieved impact on patients and staff associated with person-centred values were closer to achieving effective workplace cultures and were linked to a number of other factors and values. Factors such as organisational commitment and support, skilled facilitation and clinical leadership were identified as essential pre-requisites, as were the values of learning through reflection and systematic evaluation.

Conclusion

The review of projects supported by FoNS over ten years has enabled insights into the creation of caring cultures and how they are sustained. These insights reflect and endorse the literature around the attributes of effective workplace cultures at the frontline³, the values and beliefs that are important to work with, and the contribution practice development processes make when working with values and beliefs to develop caring person-centred cultures⁴. In addition, **this review supports the view that practice development typologies⁵ deliberately intend to address workplace culture whereas, service improvement typologies⁵ do not.** Furthermore, the role of action research has been highlighted as an approach that can also achieve successful culture change in tandem with the development of practitioners individually and collectively and contribute to the body of knowledge.

About FoNS

For over two decades, The Foundation of Nursing Studies (FoNS) has supported nurses across the United Kingdom (UK) to lead innovation in the workplace that transforms the way nurses work and care for patients. Along with systematic and enabling approaches, a distinctive feature of FoNS' work is the focus on working *with* teams in practice to help *them* to identify and make the improvements rather than *telling* them what to do. This, coupled with a commitment to person-centred nursing, results in changes in attitudes, nursing practice and the prevailing workplace culture.

For further information about FoNS go to our virtual Centre for Nursing Innovation

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Recommendations

- 1. For frontline teams wishing to develop caring, safe and effective cultures,** attention needs to be given to:
 - a. Ensuring they are involved collaboratively in developing a shared purpose, values and beliefs and developing a shared understanding of what these mean for everyday actions and behaviours
 - b. Using the shared purpose, values and beliefs to guide everyday decision-making and priorities
 - c. Enabling structured reflection and critical evaluation individually and collectively around ways of working, feedback from patients and staff and indicators of effectiveness in relation to the values and beliefs held
 - d. Developing relationships with patients and service users to ensure that there is a focus on what matters to them as well as staff, so that action around what matters is at the heart of team action
 - e. Growing both leadership and facilitation skills that pay attention to establishing and sustaining effective workplace cultures, learning and reflection
 - f. Embedding values and beliefs in workplace systems such as shared governance and systems for learning and evaluation
- 2. FoNS should:**
 - a. Continue its work with nurse-led teams
 - b. Further influence/enable practitioners to focus on culture when looking to improve service/care
 - c. Continue to promote the use of methods and approaches that enable the collaboration, inclusion and participation of all stakeholders to achieve the development of shared purposes/visions for practice improvement
 - d. Further evaluate the impact of its strong foundation in working with and through people in practice to demonstrate its value and effectiveness
 - e. Undertake further evaluative work that would verify aspects of the projects with stakeholders, to explore whether changes were sustained over time, or challenge whether values and beliefs espoused matched those experienced in practice
 - f. Review proposal and reporting templates to further amplify the processes significant to creating caring person-centred cultures
 - g. Work with organisations to develop indicators of real organisational commitment and support for frontline staff
- 3. For healthcare organisations supporting frontline teams with establishing caring, safe and effective cultures,** there is a need to:
 - a. Recognise that the workplace culture at the frontline is a major influence on quality of care and whether patients, service users and staff experience it as caring
 - b. Actively support frontline staff by offering practical support, valuing their contributions and providing continued commitment as well as systems for celebrating their achievements
 - c. Help frontline teams to access and grow facilitation expertise to enable internal facilitators to lead the development of clarity of purpose and shared values
 - d. Invest in the development of clinical leaders and facilitators around the skills needed to develop effective relationships and caring teams and cultures, specifically emotional intelligence, transformational leadership and skills in facilitating effective teams, practice and service improvement where values guide action and inform the evaluation of effectiveness and what matters to patients
- 4. For commissioners and policy makers,** there needs to be:
 - a. Much greater recognition of the role of workplace culture at the frontline in developing caring, safe and effective staff who have person-centred values at the heart of their care
 - b. Support for the development of frontline teams and their skills and expertise in clinical leadership and facilitation
 - c. Recognition of the contribution of practice development processes and how these can strengthen other change models and approaches with their focus on workplace culture
- 5. For higher education institutes and educators,** there needs to be:
 - a. Integration of practice development approaches in undergraduate and post graduate curricula, that focus on caring person-centred cultures and the links with core values, relationships, facilitation and leadership
- 6. For researchers,** there is a need to further explore:
 - a. The role and potential for action research as an effective methodology in changing workplace culture
 - b. The impact of culture and context on the implementation of values and beliefs, as well as the use of evidence and policy, and subsequently the importance of recognising workplace culture impact as an important impact factor when undertaking research

Implications for Practice

The insights achieved from this review have significance for all processes of practice improvement, innovation and change. Using values based methods which are inclusive for all stakeholders, together with enabling approaches that are creative and harness opportunities to learn in and from practice, will enhance the effectiveness of such processes and are more likely to embed change and/or influence workplace culture towards that which is person-centred, safe and effective. This is of particular significance as this is the culture where most care is provided and experienced.

References:

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