What is involved with an appreciative inquiry approach?

THE UNIVERSITY OF BRITISH COLUMBIA
UBC Health

IPPracticeED

STUDENT-LED Learning IN and FROM Teams LIFT APPRECIATIVE INQUIRY

DISCOVER

This is an appreciative gathering phase, exploring what is working well and valuing the best.

In less than one hour, team members can generate the list of conditions that are essential for the team's success. You can liberate spontaneous momentum and insights for positive change from within the organization as "hidden" success stories are revealed. Positive movement is sparked by the search for what works now and by uncovering the root causes that make success possible.

During DISCOVERY, you will explore at a deeper level, each specific interprofessional collaborative practice competency area seeking to understand the unique factors (e.g. relationships, leadership, processes, structures, values...) that make organizational excellence in this area possible. You will use a focus group comprised of 3-4 team members or one-on-one interviews with at least 3 team members.

Questions for focus group and for one-on-one interviews are available at:
http://practiceedportal.health.ubc.ca/student-led-appreciative-inquiry-into-healthcare-practice/

DREAM

Envision what may be....What may things look like in the future? How do we want things to be?

In the DREAM phase, participants are encouraged to envision the future of their organization out of grounded examples from their team's positive past.

Good news story-telling is used to craft positive propositions of "what might be."

Student facilitators collect the stories and comments across the participants. For the information collected to be understandable and useful, it must be reduced to essential information using a systematic and verifiable process. The notes made by the recorders can be verified by tapes [if recording is permitted]. Students may wish to verify/clarify ambiguous comments with their originators.

DESIGN

What needs to happen to put ideas and dreams into practice? Who needs to be involved?

In the DESIGN phase, students turn their attention to identifying themes, root causes for successful collaborative practice, future possibilities and shared ideals.

Students may wish to use statistical software or a manual approach to compile and analyze the data.

The manual approach requires a copy of the transcript or detailed discussion notes that are cleaned up and labeled. Single ideas are extracted and pasted onto each line within an excel spreadsheet or note page. Line entries are then cut into separate strips.

Students identify categories, sub-categories, patterns and themes.

Single line ideas are glued onto separate sheets of paper labeled with broad headings to represent the sub-categories identified. Students may re-categorize until they are satisfied with the groupings. Additional copies of the original transcript are helpful.

Write a short paragraph summarizing findings for each sub-category noting similarities and differences across groups. Add powerful quotes to each sub-section.

Once findings are organized in the synthesized format, they are ready for presentation and writing of the formal report.

DELIVER

This phase is putting strategies into action; moving forward with ideas and actions to allow for continuous improvement.

Findings can be written up in a narrative format that includes an executive summary, background section, methods used, major findings, conclusions, and suggestions. If there is more than one student facilitator then the report may be co-written.

The last three sections of the report (major findings, conclusions, and suggestions) move into the design and delivery phases. This is about translating the ideas, hopes and dreams into possible action. What is needed to achieve next steps? Who needs to be involved? How can next steps be sustained?

Report template can be found here:
http://practiceedportal.health.ubc.ca/student-led-appreciative-inquiry-into-healthcare-practice/

Students are to consult individually or collectively with interview or focus group members to confirm findings and draft the final version of the report. The report is delivered to the leaders within the program/organization and shared with participants.

Students will send a thank you messages to each health care professional participant. Template

What is appreciative inquiry [AI]?

Appreciative inquiry (AI) is an approach for studying and supporting change within groups and organizations. AI method uses a "collective inquiry into the best of what is in order to imagine what could be (Kessler, 2013)."

Helpful Tips

Appreciative Inquiry Focus Groups & Interviews

Applying an appreciative inquiry approach [story telling] to facilitation of a focus group or one-on-one interview helps to ground the discussion on what is currently working well while also exploring other opportunities for continued success. Individuals are energized while sharing success stories instead of the depressing talk about problems. Stories from the field offer social proof of local solutions, promising prototypes and innovation while providing data for recognizing success patterns.

Exploring effective interprofessional collaboration in practice.

The aim of this work is to help students and teams share an understanding of effective interprofessional collaborations in current practice. The National Interprofessional Competency Framework is used as a guide for this work (CIHC, 2010). A student-led appreciative inquiry approach enables the identification of tacit knowledge, successful collaborative practice, and barriers to collaboration that may not normally be revealed during students' placements. Student(s) will be leading AI focus group discussions or one-on-one interviews with health care professionals from within the organization/team.

The purpose of appreciative inquiry is to gain an understanding of *collaborative practice activities/procedures used to improve the quality of care and to clarify health professionals' perceptions of the same.* Interprofessional values, collaborative decision-making, role understanding, and functions of teams are explored.

Focus groups and multiple interviews are useful for obtaining several perspectives about the same topic as it involves a discussion with individuals to gain information. They can reveal a wealth of detailed information and deep insight about attitudes, feelings, experiences and reactions to a particular topic. When well executed, these interviews creates an accepting environment that puts participants at ease allowing them to thoughtfully answer questions in their own words and add meaning to their answers. Surveys are good for collecting information about people's attitudes and attributes, but if you need to understand things at a deeper level then a focus group or interview is a better approach.

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What health students really need to know…

1. The AI approach can be used to amplify core collaborative practice values and illuminate the 'best of what is' effective collaboration.

2. AI can facilitate identification of IPE learning opportunities and potential to build capacity for interprofessional collaborative learning.

3. AI fosters team communication and collaborative practice competency development with clinical professionals and with students.

We asked accomplished moderators what they would do to facilitate a high quality focus group. Consider how you would alter these components for an interview.

Welcome [2 min]

"Thank you for agreeing to be part of the focus group. We appreciate your willingness to participate." Discuss the project purpose, approach, confidentiality and permission to record.

Introduction [2 min]

"Hello, I am a student and my name is…:
- ✓ Name
- ✓ Program and year of study
- ✓ Preceptor name

Purpose [2 min]

"The purpose of the focus group is to support and to facilitate interprofessional [IP] education and collaborative practice development for students during their clinical education rotation. The information learned in the focus group will be used as an opportunity for students to become aware of collaborative practice activity and link practice with IP learning outcomes. Staff members have the opportunity to:
- reflect on [IP] activity, systems and supports currently in place in their setting;
- identify strengths for collaborative practice and IP education; and
- identify areas for improvement."

Ground rules [2 min]

1. We want you to do the talking and we would like everyone to participate equally
2. There are no right or wrong answers
3. What is said in this room stays in this room
4. We don't identify anyone by name in the report. You will remain anonymous

Warm up [~30 min]

"Please form small groups with individuals you don't know as well."
In pairs, ask participants to take turns conducting an interview and telling a success story based on the theme (interprofessional collaborative practices), paying attention to what made the success possible." [10 min]

"Please convene in larger group. Now, each person will retell the story of his or her pair partner."

Ask participants to listen for themes supporting success and to make note of them.

There is one student facilitator/record keeper per group. This can happen simultaneously if there are two or more groups.

Questions [~30 min]

Introduce the Jigsaw Model. We're now going to explore at a deeper level each specific interprofessional collaborative practice competency. (Show jigsaw and name each competency and ask each group where they would like to start.)

Participants return to small groups/pairs. Student facilitators act as record keepers.

Each group chooses a competency area for discussion. Questions for discussion are available from [http://practiceedportal.health.ubc.ca/?p=704&preview=true]:

Debrief [10-15 min]

Return to larger group.
Each pair/small group shares discussion points with larger group.
Collect insights and patterns for the whole group to see on a flip chart. Summarize if needed

Closing [2 min]

Thank all participants and provide a timeline for delivery of the final report.

AI Discussion Guide:

Patient/Family Centered Care
- How are shared goals successfully made with your patient/family?
- What is the concept of partnership with patients/families mean to you? Provide an example.
- What would successful patient-family centered care look like for you within your program?

Communication
- How did you establish team communication? How is it maintained?
- Tell us an example when communication is effective among the team?
- What would successful interprofessional communication look like for you within your program?

Collaborative Leadership
- What opportunities are available for team members to engage in interprofessional dialogue?
- How do you establish and maintain effective and health working partnerships with other professionals, whether or not a formalized team exists
- What would successful collaborative leadership look like for you within your program?

Role Clarification
- How are roles defined within your program?
- Tell us an example of when roles needed to be fluid/re-defined for positive outcomes?
- What would successful role clarification look like for you within your program?

Team Functioning
- When things don't go as well as planned, how does your team learn from this?
- How is trust built and maintained among the team?
- What does successful team functioning look like for you within your program?

Facilitation Tips for Focus Groups

Q: How can I ensure that all participants talk and fully explain their comments?

A: Some helpful probes include:
- *Can you talk about that more?*
- *Can you help me understand what you mean?*
- *Can you give an example?*
- *Confirm complex or ambiguous comments with a paraphrase*

Q: What should I do if I am losing control of the focus group?

A: Establish a non-verbal cue with your preceptor and co-facilitators that can be used to indicate that you need assistance. Alternatively, you can just ask for assistance.

Q: What should I do if I encounter a dominating participant?

A: Here are some strategies for managing:

- **The self-appointed expert**: *"Thank you. What do other people think?"*
- **The dominator**: *"Let's have some other comments."*
- **The rambler**: Stop eye contact: look at your watch; jump in at their inhale and say, "Being mindful of the time…let's allow some other voices."*
- **Debbie Downer**: *"When is it that we have succeeded even in a modest way?"*