

Nourish to Flourish



Nourish to Flourish brings together practitioners' voices and creative practices, and appreciative reviews of resources that support strengths-based approaches to human interactions.

Voices from the Field



Keith Storage | Australia

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It's my pleasure to introduce Helen Hunt as our voice from the field and her article, "What's Your Theme Tune?" illustrating how Appreciative Inquiry (AI) can be a powerful tool in healthcare by shifting the focus from errors to excellence, Helen's narrative details a personal evolution – from rigid institutional thinking to embracing the adaptable, human-centred principles of AI. She highlights key moments of learning, vulnerability and growth, recounting experiences that include facilitating workshops and overcoming imposter syndrome. Helen's journey highlights AI's power to foster connection, reframe challenges and inspire hope, culminating in her recognition of AI as integral to both professional development and personal fulfilment.

What's Your Theme Tune?

Eight years ago, if someone had asked a younger and pre-perimenopausal Helen "what theme tune plays in your head when you are asked to speak about your Appreciative Inquiry practice?", it would be the *Mission Impossible* theme music playing in my head. I would have thrown my arms up in protest "No way, not me! I can't do that, let me direct you to the experts!" Fast forward to now, and my theme tune is *Ain't No Mountain High Enough*.

Helen Hunt | United Kingdom



Helen Hunt's 24-year career with the NHS in the UK has seen her transition from frontline roles to senior management. Currently assistant programme manager at Health Innovation West Midlands, she focuses on developing and implementing evidence-based healthcare improvements through impactful initiatives, including the Learning from Excellence programme. Helen's contribution to two Health Service Journal awards, her role in introducing Appreciative Inquiry to her region, and her ongoing pursuit of a Master of Science (MSc) in Healthcare Leadership, reflect her passion and commitment to enhancing quality of life.

Discovering Appreciative Inquiry

My AI journey began through my work at Health Innovation West Midlands (HIWM), located in the central part of England known for being one of the most urbanised areas in the UK. HIWM is one of fifteen innovation networks across the country established by the National Health Service (NHS) to connect health and social care, academic organisations, local authorities, third sector, industry and citizens to spread innovation at pace and scale – improving health and generating economic growth. In my role as assistant programme manager at HIWM, I supported the Learning from Excellence (LFE) programme. LFE is a philosophy that shifts the focus from healthcare errors to learning from the excellence that happens every day in healthcare. It helps to rebalance the scales. LFE reports are created citing the excellence by answering three questions:

- What happened?
- Who was involved? And
- What can we learn from this?

The founder of LFE, Adrian Plunkett, wanted to take the learnings from the reports and use the insights for continuous improvement. He felt that the standard root-cause analysis method was insufficient and stumbled across David Cooperrider's work in AI. As we took LFE on tour across the West Midlands region, the same questions cropped up: Where can I learn about AI? How can I access it? Can you arrange training? As a pragmatic person – and in a lightbulb moment – I saw an opportunity to jump in and answer the calling! Adrian introduced me to Suzanne Quinney and Tim Slack from Appreciating People, a company name I have always loved. Imagine being asked where you work and answering with a grin, "Appreciating People"!

Shifting from institutional thinking to AI

Personally, at this point in my career, I recognised that I was still institutionalised to the NHS way of thinking – being rigid and needing specifics answered. I soon realised that AI is highly adaptable to the complexities of healthcare and not constrained by a one-size-fits-all model. Suzanne was very patient with me as she guided me through an enlightening journey. We set up our first two-day workshop for twenty people. I wasn't yet convinced, and I would be on the course as well to learn from this new AI approach. I will be honest and say my heart wasn't in it. I saw it as a transactional work programme of activity. I was responding to the need of my organisation, to delivering an output of how many people in the NHS we could get "...trained in AI".

I recognised that I was still institutionalised to the NHS way of thinking.

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Suzanne opened the workshop with her classic ice breaker: asking participants to pick two image cards to express what they felt about AI now, and where they wanted to be after the course. She role-modelled, becoming emotional as she shared her response. Her openness and ability to share her feelings unnerved me; it is not something I was used to. This caught me off guard. I worked at a large acute hospital from the age of 18, a place where you left your problems at the door and put your “game face” on for the day ahead. Other participants began to share their thoughts, and I saw raw emotion from them as well – some of that emotion was unrelated to AI, but connected to the current turmoil they were experiencing at work or at home. It became clear that people were looking for hope through AI. When it was my turn to share, I wasn’t 100% true to myself, and, despite the emotion shown by others, I still didn’t feel I had permission to be vulnerable. I gave a corporate response.

Practice and reframing in action

I attended all the AI sessions that were being delivered in order to build connections and to network. Throughout this period, I realised that I was becoming drawn to the methodology. Appreciative Inquiry had found me at a time when I didn’t realise how much I needed it. I had started a new role with autonomy that I wasn’t used to, and working with a manager who supported me and didn’t try to micromanage my work. This was new to me. I was finding it hard to adjust.

I became aware of using AI techniques without thinking, almost like muscle memory.

Over time, my interactions with AI became more regular due to the demand from stakeholders. I became aware of using AI techniques without thinking, almost like muscle memory. I have found “reframing” to be a particularly valuable tool in my role supporting NHS organisations to implement innovations in changes to medicines, technology or behaviour. These innovations are often implemented without any additional funding and can be viewed as “one more thing to do” on top of their already busy day jobs. Often, when I first meet stakeholders, they will put up walls by explaining their current landscape: lack of resources, staff and time. By listening and allowing them to vent, I enable them to be heard. I can then subtly introduce a reframe question to help them identify the positive aspects of their work. I don’t ignore the negativity, but I want to fire up their passion and remind them of why they decided to work in healthcare.

Returning to my roots: Overcoming fear and imposter syndrome

In the summer of 2024, I was invited to co-deliver a workshop with my human factors colleague at the *Care and Compassion: Fostering a Culture of Civility* conference. Human factors is the study of how people interact with machines,

tools, systems and processes. I felt the pressure, as the conference was held at the last acute Trust where I had worked from the age of eighteen. On top of that, we were asked to deliver two 45-minute sessions introducing AI and Human Factors!

The years 2023/24 have been challenging for my Trust, which has been under the spotlight of change, scrutiny and action as they embarked on new ways of working – at a significant pace. Led by a new chair and CEO, the intensive change programme is addressing concerns raised by regulators, stakeholders and media around patient safety, governance and culture. It has also been supported by findings from Care Quality Commission inspections and three independently commissioned reviews, including the voices of over 4,500 colleagues in the culture review, as well as 7,000 colleagues in the national staff survey.

'I can deliver AI concepts and support you with them.'

At this point, I would have been confident in saying “I can deliver AI concepts and support you with them”, but to deliver in my “home” hospital with people who knew me triggered my imposter syndrome. In the end, my AI muscle took over; I felt compelled to support this conference and play my part in helping with the Trust’s and its stakeholders’ recovery.

A workshop that sparked connection and growth

My colleague and I designed a workshop aimed to introduce AI and Human Factors concepts to participants, many of whom were unfamiliar with these topics. The session included two exercises:

- 1. Personal story sharing:** Participants shared personal stories of success, focusing on leadership or personal experiences. They listened to and identified strengths in each other’s stories.
- 2. Good leadership moments:** Participants shared instances of good leadership they had experienced or witnessed. They answered supplementary questions about what made the leadership effective, what enabled it and what could enhance future leadership moments like these to happen more often.

A workshop like ours being delivered two years ago would have been laughed at.

AI practitioners reading this who are well-versed in AI may think this seems a fairly low-level in introduction to AI, but I must give you context. This hospital has endured significant trauma. I am not exaggerating when I say that staff suffer symptoms typical of post traumatic stress disorder (PTSD). I know this; I am one of them. I have also been that manager that has carried out poor practice. Therefore, a workshop like ours being delivered two years ago would

have been laughed at and thrown out. This was my chance; there was a crack in the doorway, and I was determined to open the door fully.

The room we were given to deliver the workshop in was down a tiny corridor, with chairs laid out like a lecture theatre and no windows. “Oh no,” I thought as I walked in with the *Jaws* theme music playing in my mind. No windows. I remembered quickly how Suzanne always requested a training room with windows and access to outdoors if possible. (Rookie mistake, Helen! Note to self for next time.)

A classic reframe moment

Sharing food is a universal human connection.

In a classic reframe moment, we quickly jumped into action and rearranged the room to be one big circle. We also brought a small bag of sweets to put on each chair; sharing food is a universal human connection. I hoped this would strengthen a positive first impression.

Deep breaths: it’s show time. I was the lead facilitator and role-modelled the exercises we wanted people attending to participate in. I found myself feeling emotional. I then realised what Suzanne feels when she delivers AI training. I felt a deep responsibility to show people in front of me that there is a different way of doing things, and that this isn’t all “fluffy stuff”.

A new tune: Embracing Appreciative Inquiry as a practitioner

As people left the room, many shared how wonderful the experience had been – something they had never felt before.

We let the conversations unfold. I was nervous, but I needn’t have been. I saw moments of animated hand gestures, people leaning in toward one another (these pairs were strangers, remember), and the room growing louder with lively discussion. We even had to interrupt to bring the exercise to a close – a wonderful sign of engagement!

As people left the room, many shared how wonderful the experience had been – something they had never felt before. During the feedback session, some became emotional as they reflected on their “sparkling moments”. It was an incredible, raw and in-the-moment experience that I will always treasure. We were even invited to several team meetings to replicate what we had done. I was absolutely thrilled and proud to have overcome my imposter syndrome. I can now confidently say that I am a practitioner of Appreciative Inquiry.

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