

Kindness in healthcare

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'Humankind challenged me and made me
see humanity from a fresh perspective'
Yuval Noah Harari

'Hugely, highly, happily recommended'
Stephen Fry

'An exceptional read'
Matt Haig



Human kind

A Hopeful History

Rutger Bregman

Bestselling author of **UTOPIA FOR REALISTS**

BLOOMSBURY

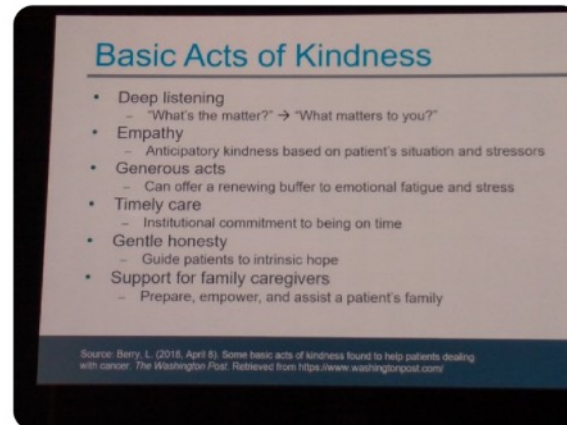




Bob Klaber
@BobKlaber



My growing reflection that we have been too apologetic about kindness, compassion, empathy "I know it is soft & fluffy but it is important..." Kindness is the BUSINESS end of healthcare. We need to start with it. Love this from [@maureenbis](#) [@donberwick](#) [@ProfLenBerry](#) [@QualityForum](#)



DrDominiqueAllwood and 5 others

10:26 · 29 Mar 19 · [Twitter for Android](#)

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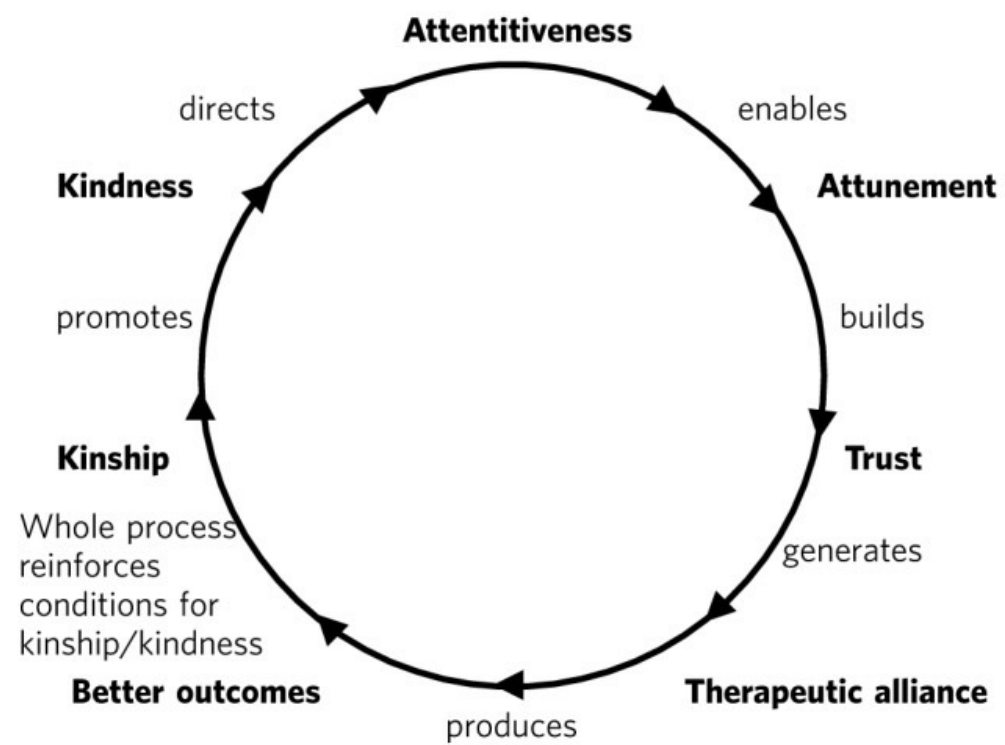
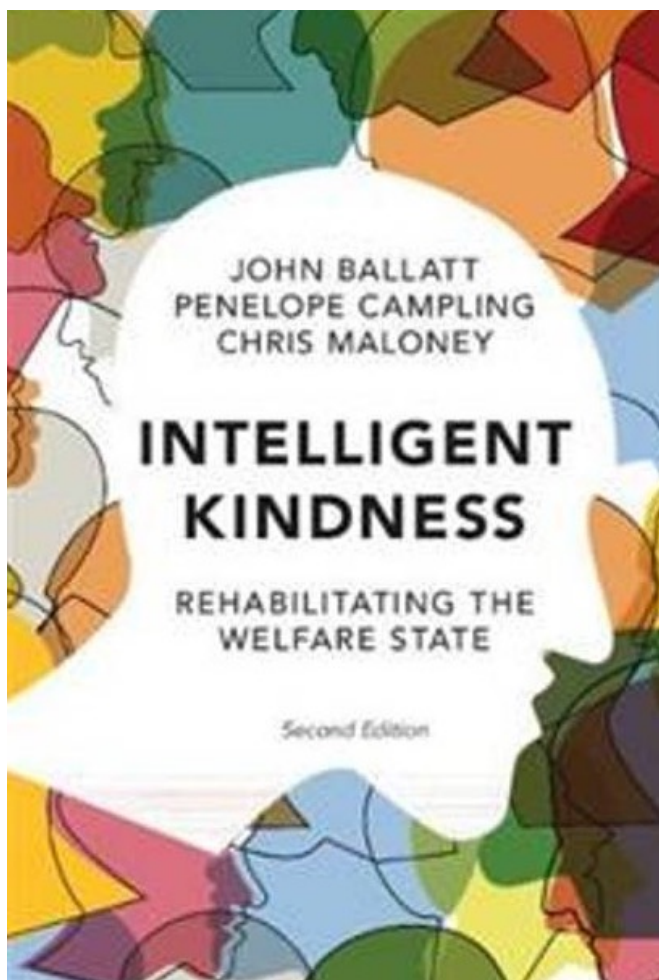
268 Retweets **624** Likes

This conversation about kindness, and about hope, is also about how we improve quality



Institute of Medicine - 2001 (US)

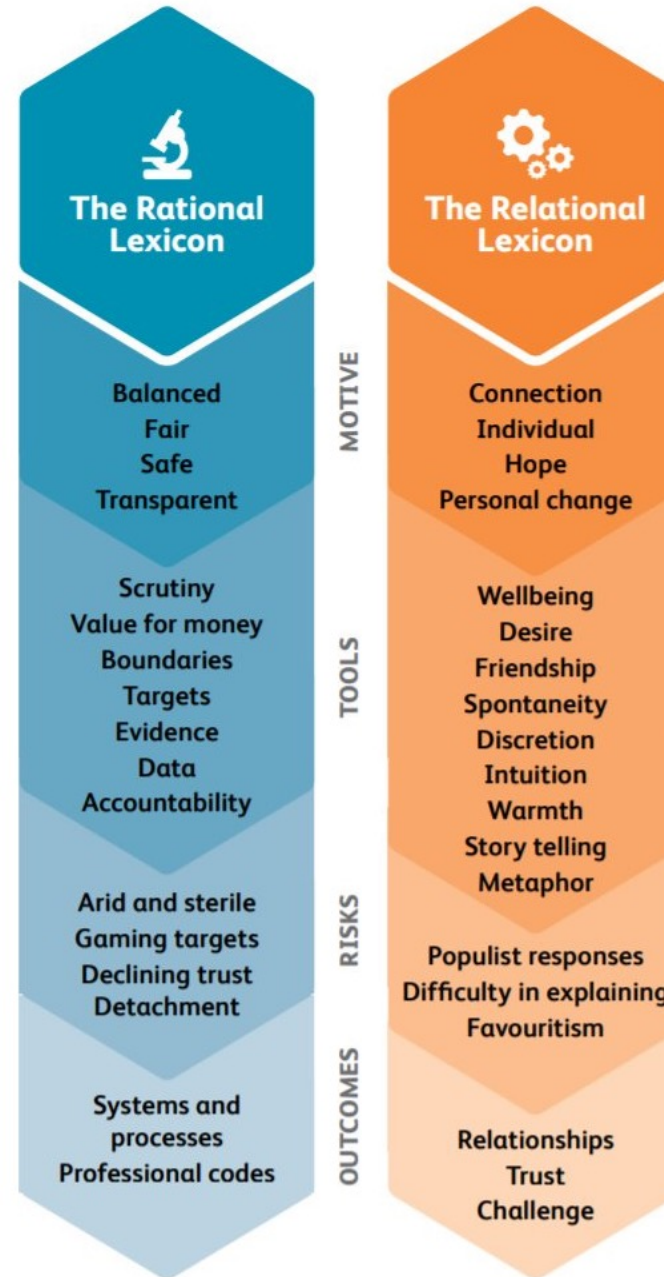
Learning from others: Theories, practical experience & evidence





Kindness, emotions and human relationships:
The blind spot in public policy
Julia Unwin, Carnegie Fellow

The two lexicons of public policy:



Measurement & kindness

Simon Anderson & Julie Brownlie, Carnegie UK Trust



Getting the
measure of
kindness

- *“What gets measured is what gets done...”*
- Holding the power through determining what gets measured
- Can we measure kindness?
- Do we want to measure kindness?
- **Intent** of the choice of action to be kind
- **Conditions** that encourage kind behaviours
- **Outcomes** of kindness (on the recipient and the giver)

Research on Kindness – University of Sussex

Prof Robin Banerjee, Dr Gillian Sandstrom & team

The work of Sussex Kindness Research broadly fits within two main themes: research intending to understand the nature and impact of kindness, and research on specific kindness interventions designed to promote wellbeing. These themes have important connections with each other, and they both inform and are informed by theoretical advances across multiple disciplines.



Kindness, Relationships and Wellbeing

Basic and applied research to understand the nature of kindness and how it is connected with our social relationships and our wellbeing.



Kindness Interventions

Qualitative and quantitative research investigations of specific strategies that are designed to promote kindness.

Including research into:

- The neuroscience of charitable giving
- 'Citizen Aid' – small scale development initiatives set up by individuals to support others
- Reading fiction – and empathy
- Cognitive, motivational & socio-contextual factors in everyday kindness

Including research into:

- Kindness and well-being in adolescence
- Kindness within Public Services
- Reading fiction – and empathy
- Cultivating compassion at the level of self, team, patient and organisation

Our work is supported by [KindnessUK](#), a not-for-profit organisation with the goal of making kindness a greater part of everyone's daily lives and increasing the awareness of the positive benefits of kindness to health and overall wellbeing of society. KindnessUK also funds the [Kindness UK Doctoral Conference Award](#).

Role of kindness in cancer care

Len Berry et al; J Oncol Pract. 2017 (11):744-750

Six types of kindness were identified:

1. deep listening
2. clear empathy
3. generous acts of discretionary effort that go beyond what patients and families expect
4. timely care that reduces stress and anxiety
5. gentle honesty in discussions and conversations
6. thoughtful support for families and carers

Compassionate leadership – the work of Michael West

West, M. A. (2021). Compassionate leadership: Sustaining wisdom, humanity and presence in health and social care. London Swirling Leaf
West MA, Chowla R. Compassionate leadership for compassionate health care. In Gilbert P, editor, Compassion: Concepts, Research and Applications.
London: Routledge. 2017. p. 237-257

Where these four behaviours are widely present in healthcare organisations care quality, staff wellbeing, team-working and financial performance are markedly better:

- 1. Attending:** paying attention to staff; ‘listening with fascination’;
- 2. Understanding:** growing a shared understanding of what the people in your teams are facing
- 3. Empathising;** ‘walking next to people’ – feeling the distress or frustration of others without feeling over-whelmed
- 4. Helping;** taking intelligent action to serve or help

Psychological safety

Google's Project Aristotle

2 years, 180 teams & 37,000 employees

Impact

- Team members can see and feel that their work matters & leads to change

Meaning

- Work is personally important to team members

Structure & Clarity

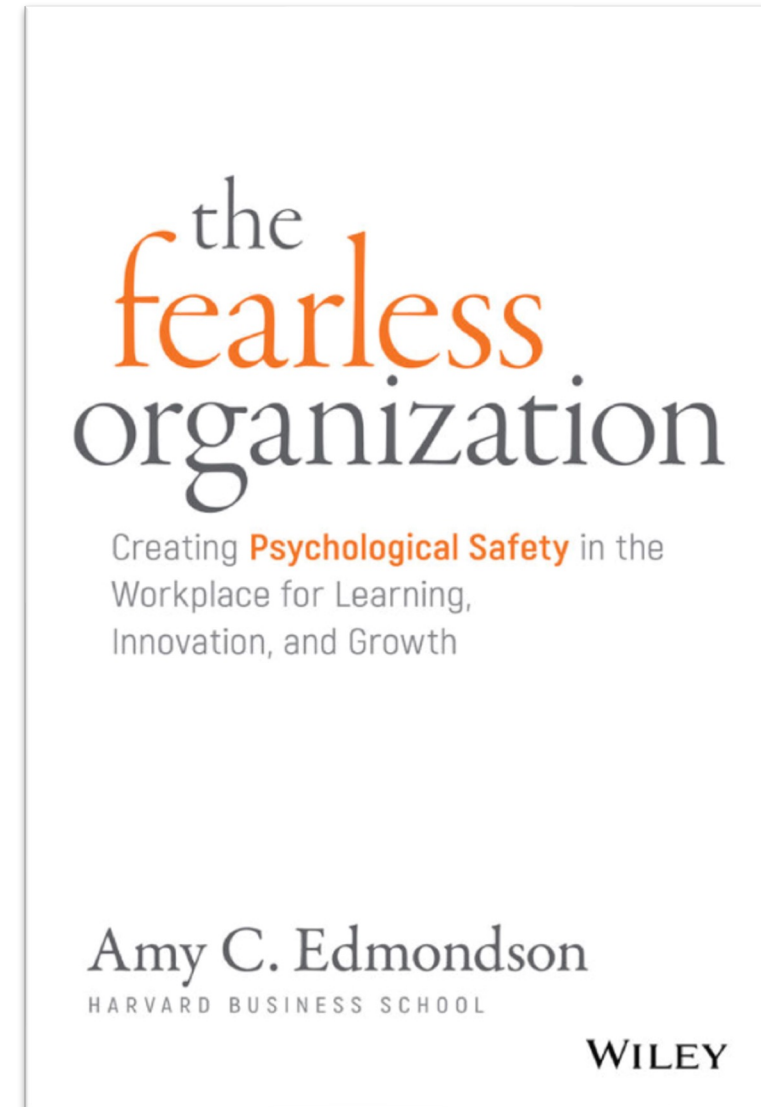
- Team members have clear roles, and their work has clear aims, measures and plans

Dependability

- Team members can rely on each other to deliver high quality work

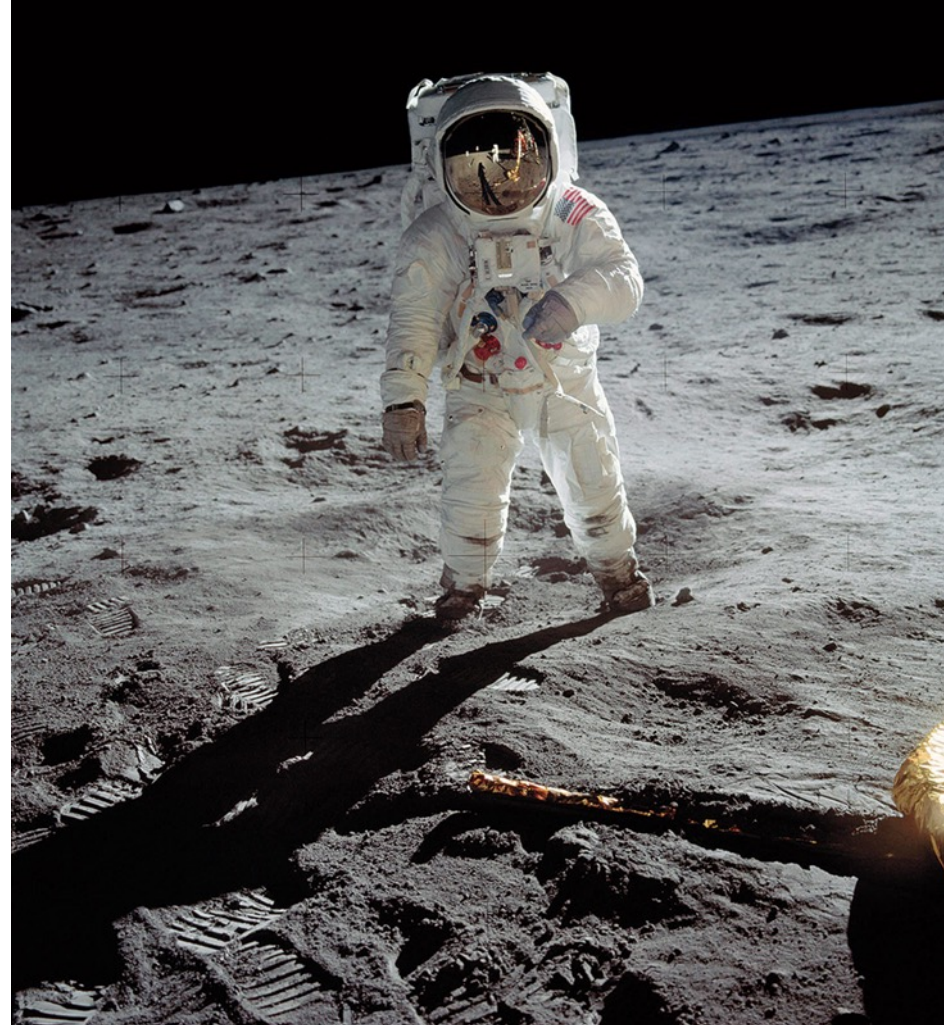
Psychological Safety

- Team members feel safe to take risks and to be vulnerable in front of each other



Leading for kindness

Mission / Purpose / Meaning



Mission / Purpose / Meaning

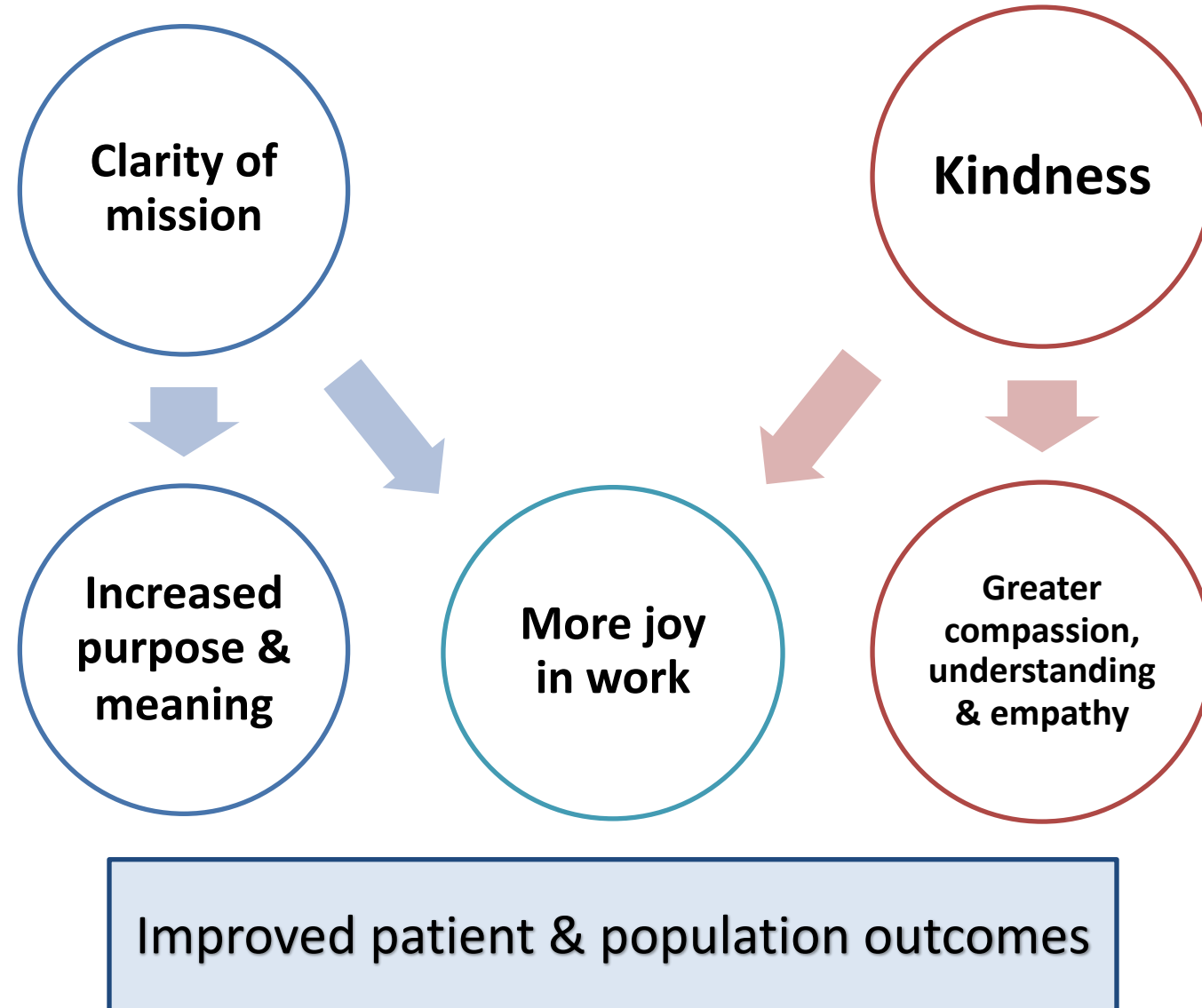


Celia Jacobs

Our collective
leadership
challenge:
To reconnect
healthcare with
its mission &
purpose



How kindness & reconnecting with our mission will improve patient and population outcomes



Our conversation for kindness
- the learning in insights so far

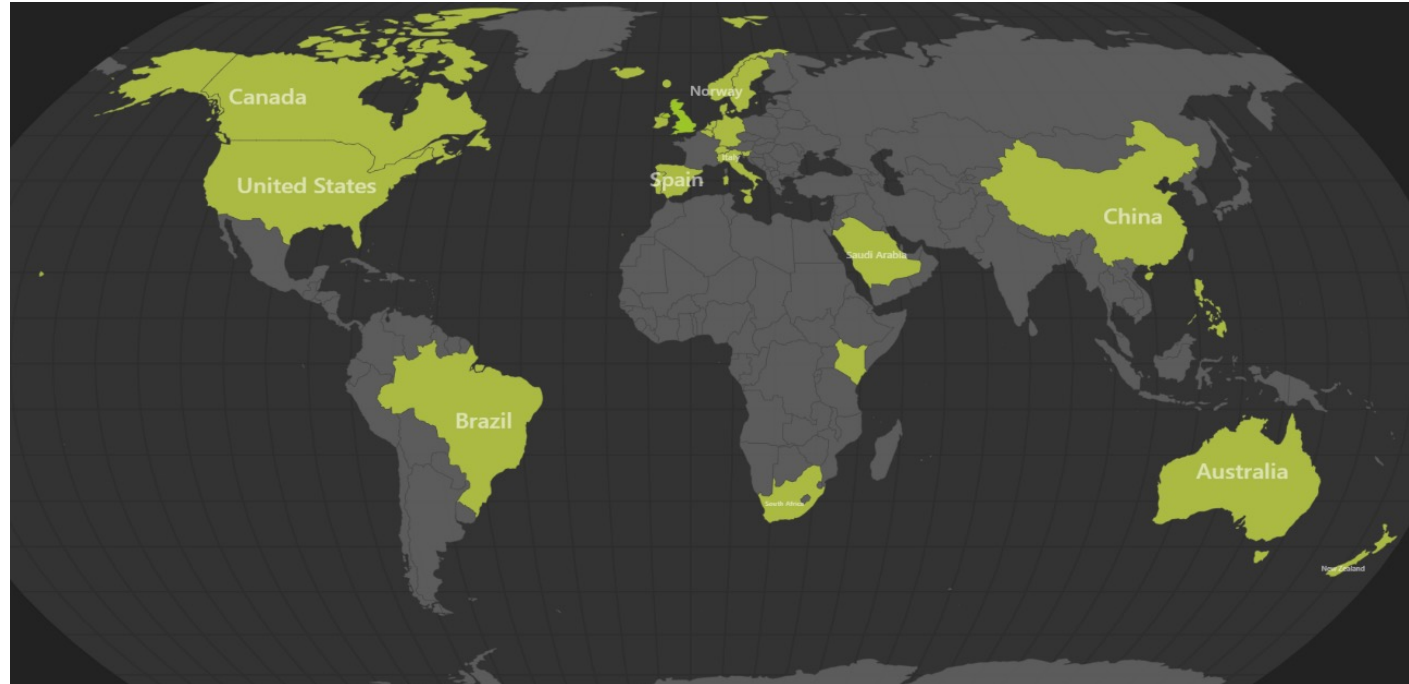
Our conversation for kindness

- Monthly call on 3rd Thursday of the month [6-7pm UK time]
- Aimed to create an inclusive space where people can come together to listen, learn, think differently, recharge and mobilise for action
- Given strong focus on sharing of resources, energy and ideas

With thanks to a core group who have guided, facilitated & convened the conversation:

- **Maureen Bisognano**, Institute for Healthcare Improvement (IHI); USA
- **Gabrielle Mathews**, Whittington NHS Foundation Trust; England
- **James Mountford**, Galileo Global Education
- **Suzie Bailey**, The Kings Fund; England
- **Göran Henriks**, Region Jönköping; Sweden
- **Anette Nilsson**, Region Jönköping; Sweden
- **Dominique Allwood**, UCLP & Imperial College Healthcare NHS Trust; England
- **Cath Crock**, Royal Children's Hospital Melbourne & Hush Foundation, Australia
- **Nicki Macklin**, University of Auckland, New Zealand
- **Bob Klaber**, Imperial College Healthcare NHS Trust; England

Over 1400 contributors from 35 countries so far



Denmark, Saudi Arabia, Norway, Singapore, England, Faroe Islands, Italy, USA, Scotland, Canada, Northern Ireland, Ireland, Sweden, Belgium, Netherlands, Iceland, Australia, Wales, Germany, Hong Kong, Spain, Slovenia, Malta, Brazil, Philippines, New Zealand, Portugal, Switzerland, China, Kenya, South Africa, Mexico, UAE, Estonia, Latvia

40 months into the conversation – the nine key themes that have emerged include:

Kindness is a choice of action we can all take, role model & lead for

Kind behaviours are as effective as any action in creating psychological safety at work

There is a growing evidence base of the impact of kindness on patient outcomes & staff well-being

Leading with kindness needs to be central in work to reduce staff burnout & creating inclusive workplaces

Systematically challenging unkind behaviours (and exploring why) is a crucial role of leaders

A key lever for change we can all get behind is to transform how we teach & train our current and future workforce

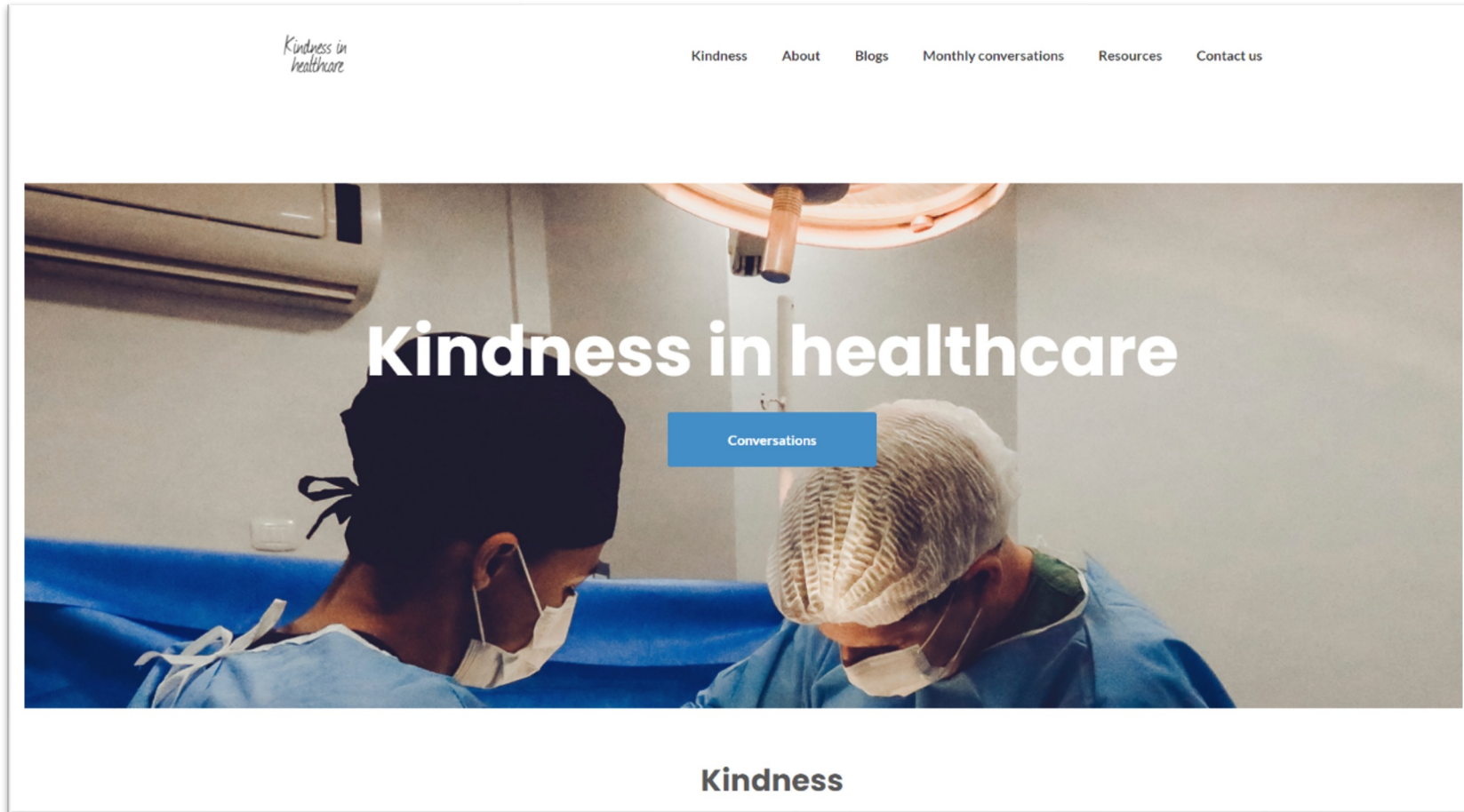
Importance is placed on the things we measure
Kindness (conditions, activities, outcomes) is definitely measurable

Kindness is a cycle - being kind stimulates more kindness, which then grows the impact

Kindness is a starting point for everything – critical in our work to improve quality, equity, safety, productivity

If you know anyone who would like to join the conversation, please email me: bob.Klaber@nhs.net

kindnessinhealthcare.world



Three questions to reflect on:

- (1) What am I going to do to increase the focus on kindness, to build a sense of hope and to reconnect myself and my colleagues with the real mission in healthcare?
- (2) When I see unkind behaviours, what am I prepared to walk past and ignore?
- (3) What are the kindness 'always events' I can promote and role-model in my leadership of high quality, safe, equitable care?

