

Conversations for Kindness

Using 'Clean Language' to achieve better and kinder conversations in healthcare.

15 February 2023

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This insights pack summarises the session, but you can also [watch the event on YouTube](#)

About the movement

Conversations for Kindness is a monthly virtual meeting that was set up in the summer of 2020 by eight colleagues and friends working in healthcare across Sweden, the UK and the USA: Bob Klaber, Dominique Allwood, Maureen Bisognano, Goran Henriks, Suzie Bailey, Anette Nilsson, Gabby Matthews and James Mountford. The purpose of the meeting was to have some time together to continue some initial conversations around kindness, and its role at the 'business end' of healthcare, and to plan interactive workshops on this topic.

Conversations for Kindness

- Monthly Zoom call on the third Thursday of every month (6-7pm UK time)
- A focus on listening, learning, thinking differently and mobilising for action
- An open culture of sharing of resources, energy and ideas

If you would like to join the conversation for kindness, please complete this **[contact form](#)**

Joining the Conversation from across the world

More than **70** Kindness in Healthcare community members came together from all over the world for this Conversation for Kindness. Once again, we had new faces join us for the first time!

A few of the faces joining from around the world



The image shows a Zoom meeting interface. The main area is a grid of 40 video thumbnails, each with a name and role below it. The participants are:

- KLABER, Bob (IM...)
- Rennie, Christina ...
- FULLER, Roberta (RO...)
- Daniel Wolfson (Guest)
- Abdalla, Hesham (RT...)
- Judy Rees (Guest)
- S George (Guest)
- Hester Wain (Ext...)
- Seema Srivastava...
- Carolyn Cleveland (Ex...)
- bimbi fernando (Guest)
- Alfred Sadler (Guest)
- NYAWADE, EHzab...
- Annabel Park (External)
- Annagail Leaman ...
- Cheryl Martin (Extern...
- Dina Dhorajiwala (Gu...)
- Steve McCann ...
- Suzie Bailey (External)
- LEE, Helen (N...)
- Karen Patterson (...)
- Damara Gutnick (Exte...
- HUNTER, Joanna ...
- Fazeela Chharawala
- Anna (Guest)
- Martha Martin (G...)
- Marvic Sammut (...)
- Gerke Lange (Ext...)
- Catherine Crock (...)
- Sara Turle (Guest)
- Nicki Macklin (External)
- Claire Snyman (G...)
- MCALISTER, Heat...
- Kath Rooksby (Extern...
- Heather Lambert (She...)

On the right side, there is a list of participants represented by colored circles with initials and names:

- VD (DUBLON, ...)
- ÅS (Åkvist An...)
- EK (Ekaterini K...)
- G (G (Guest))
- KK (KESSACK, ...)
- AM (Matson, A...)
- RJ (JOSEPH, ...)
- AM (MOHABIR, ...)
- AA (AKANJI, A...)
- LM (MCCLELLAND...)
- GM (Mathews, ...)
- ... (View all)

At the bottom right, there is a larger video thumbnail of a woman with long dark hair.

Who did we hear from? Speaker profiles

Judy Rees is an expert in highly engaging online facilitation, which is underpinned by her mastery of Clean Language – a precision inquiry framework.

Judy co-authored the first mainstream book on Clean Language and has trained hundreds of professionals worldwide in this powerful communication methodology.

Steve McCann has collaborated with Judy since 2017, developing and delivering Clean Language-based solutions.

Steve focuses on practical application, co-creating insights and actions for clients in humanitarian, social impact, and commercial sectors, leveraging Clean Language principles.

Their ambition is to reach **one million people** within healthcare worldwide with this idea.



What did we hear? Insights from Judy

Judy introduced the idea of clean language:



Not about swearing



Not about speaking clearly and being understood



A precision method of enquiry



A set of questions that gets the information that you need more quickly but in a way that the person you are asking feels heard and understood

What did we do? Trying out Clean Language

Before we had a go at using Clean Language questions, we needed to think about the content for our conversations. We took a moment to individually reflect on:

What is something that gets in the way of understanding or feeling understood at work?

Karen: Too many acronyms!

Bimbi: Not being on the same wavelength

We then moved into breakouts to try using a Clean Language question. We took turns to ask each other about the problems we'd identified:

“When x happens, what would you like to happen?”*

Reflections on using Clean Language

We shared our reflections on using this question:

Damara:

The person who was being asked had to think about what the next steps would be to overcome the barrier.

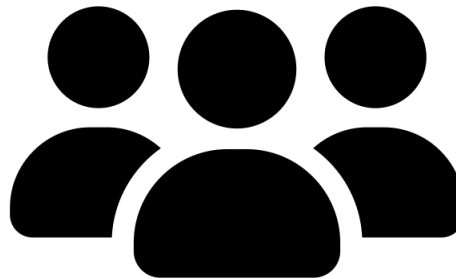
It moved the conversation forward.

Carolyn:

The person I was working with immediately started looking up rather than looking at me - she was really engaged with her own thoughts.

Bimbi:

It seemed like a shift to joint ownership, even though the person sharing the problem was in the driving seat. They felt comfortable talking about solutions.



What did we hear? Insights from Hesham

Dr Hesham Abdalla, consultant pediatrician at Oxford University Hospitals Foundation Trust, shared his experience of using Clean Language in clinical conversations .

He shifted from asking patients

“How can I help?”

to

“What would you like to happen?”

He reflected that “this certainly changed the power dynamics” and “put the patient...in the driving seat.”

He shared that by focusing on the process of a consultation conversation rather than the output he wants to achieve, he is more able to empower the patient and hold more creative, better and quicker conversations.



What did we hear? Insights from Siobhan

Siobhan Aris, a specialist palliative care nurse, introduced another Clean Language question she uses in her work:

For example:

“What kind of...?”

“What kind of pain?”

“What kind of support?”

Siobhan reflected on the change she saw:

“You see an **engagement**, you see someone think, you see total focus on what you’ve said”

“You get there **quicker** in such an **authentic** way that it builds a really strong therapeutic foundation. It doesn’t feel like you’re rushing the consultation.”



Group discussion

Judy asked to discuss two questions in our breakout groups:

1. How do these ideas resonate with you?
2. How might you help us on our mission to bring Clean Language to one million people?

Mary:

Does it translate well across cultures and languages?

Steve:

Clean Language is the most culturally cross-functional method I've ever used because it is about the other person, empathy and respect.

Bimbi:

It seems really pragmatic and simple as an approach.

Maureen:

There is a huge amount of overlap with other ideas we've discussed in this context e.g. [the Hello My Name Is campaign](#)

Hesham:

Occasionally people struggle to engage with Clean Language. In those instances, I find a happy middle ground between Clean Language 'proper' and the traditional closed questions I used to ask.



For example, I might ask 'What would help you achieve this' rather than 'How can I help you' at one extreme, or 'What would you like to happen' at the other.

Group discussion

Participants also shared their reflections in the chat:


Kath Rooksby 7:31 AM

KR I love how using Clean Language is interchangeable between work and life in it's every context

 2  1


Claire Snyman (Guest) 7:32 AM

CS This is very powerful. As a patient, this type of questioning style is not something I receive often - runs alongside the theming of asking what matters most to me. Moving to putting me as the patient in partnership in my care.

 1

Carolyn Cleveland (External) 7:34 AM

CC It fits so well within the empathy training I use, but I don't use words in that training but this gives something that feels authentic.

 1

Anna Baverstock (External) 7:55 AM


AB As paediatricians looking to implement Martha's rule^{*} in the UK - clean language provides a real opportunity to hear parents / patients concerns more clearly

Abdalla, Hesham (RTH) OUH (External) 7:36 AM

HA It's all about breaking free of presumptions that we don't know that we hold.

DUBLON, Victoria (ROYAL FREE LOND... 7:36 AM

VD This puts the person central to the decision making.

 2

Kath Rooksby 7:37 AM

KR Feels like such a good use of time which is always precious

**[Martha's Rule](#) is a patient safety initiative which allows parents, family or carers access to a rapid review from a critical care outreach team*

Further resources to check out

A number of recommended readings and resources were shared in the chat during the Conversation. They are listed below.

- [Random Acts of Kindness Foundation](#) - free resources to help you make kindness the norm
- [What Is Clean Language?. Judy Rees](#) - a high-level introduction to Clean Language
- [Clean Language: David Grove's Questioning Model, Judy Rees](#) - a more detailed overview of Clean Language
- [Using Clean Language in Healthcare](#) - a short interview with two UK doctors on how they use Clean Language in their work
- [Clean Language: Revealing Metaphors and Opening Minds, Wendy Sullivan and Judy Rees](#) a comprehensive introduction Clean Language

[Check out resources from our previous sessions on our website](#)