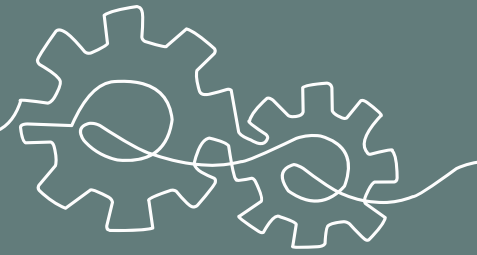


Facilitation tips



Get the right people in the room

Invite 6-10 people maximum who understand how things normally work, not just those directly involved. Include the "unusual suspects" - porters, ward clerks, IT teams - they often have valuable system insights.

Prepare like your success depends on it

Visit the area if you're unfamiliar, review previous incident reports, and develop SEIPS-based questions covering task, tool, environment, and organization factors (avoid focusing on person factors). Reserve 25% of the planned time for action development.

Master the art of facilitation

Be comfortable with silence - count to 10 after asking questions. Use reflective listening ("What I'm hearing is...") and open questions starting with Tell, Explain, Describe, Talk me through. Check with nervous attendees beforehand about how they'd prefer to contribute.

Create psychological safety from the start

Open by thanking people for their expertise, outline that you're here to improve systems for better patient outcomes, and remind everyone that if discussions slip into blame, you'll gently redirect to learning. Make it clear this is confidential and about learning together.

Broaden input opportunities

Consider what key questions the patient and family would like answered, and whether there are valuable perspectives from other stakeholders or patients that should be included in the discussion. For anyone unable to attend, think about how their experience could still be incorporated.

Be the conductor of the orchestra


Your energy sets the tone - follow the flow of discussions but move on when you hear "I agree with..." repeatedly. Balance voices and directly invite quiet contributors. When emotions run high, show empathy: "I can see this is difficult." For blame-focused comments, try redirection.

Focus actions on systems not people

Brainstorm first, critique second. Use IFACES (Impact, Feasibility, Acceptability, Cost, Equity, Sustainability) to test ideas. Be specific - avoid vague actions like "improve communication." Define who will do what by when and how you'll measure success.

Remember why you're here

The goal is safer patient care through better systems, not a perfect report. Embrace the complexity - real problems are messy. Celebrate insights when someone shares something that helps everyone understand better. Learn from each session to improve the next one.



The best learning responses feel like collaborative problem-solving sessions, not formal investigations. Trust the process, trust your participants, and create conditions for honest dialogue.