

Critical companionship video & resource guide: Facilitating career progression and Impact from person-centred practice to person centred systems

Facilitating career progression from person-centred practice to person-centred systems



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CRITICAL COMPANIONSHIP RESOURCE GUIDE: INTRODUCTION AND BACKGROUND

Critical companionship is a **non-hierarchical, person-centred, experiential facilitation of learning relationship** in which the facilitator **accompanies** a person or people on a **learning journey and helps them to go where they want to go**



(Titchen, 2004). Within a trusting relationship and using high challenge/high support, companions enable **co-learning and inquiry** with the person(s) they are accompanying. As an example of co-learning, leaders, facilitators, mentors or clinical supervisors, with no previous experience of being a critical companion, might negotiate help for learning how to become one from the person they are accompanying. The inquiry focus for that person might be, for example, how to

become an effective strategic enabling leader or embedded researcher. Whatever the inquiry focus, **human flourishing** for all involved is the ultimate outcome aimed for.

Developed by Angie Titchen and Kim Manley, this resource guide began life as an online guide for the Multi-Professional Consultant Practice (MPCP) programme. This programme, led by Carrie Jackson, Kim Manley and Renee Ward, was created for aspiring consultant practitioners who, already with expertise in person-centred professional practice in health or social care, wanted to progress their careers to become consultant practitioners. The six-month programme was developed and piloted, collaboratively, by the IMPact Research group, University of east Anglia (UEA) and East Suffolk and North Essex Foundation Trust (ESNEFT) (see profiles of contributors here). Each participant was to have an external critical companion for the six-month online programme, but unfortunately, due to COVID restrictions, preparation of the external companion was minimal, the CC team were not involved, and it seemed to focus on the nature of critical companionship and discussion about its difference from mentorship and clinical supervision.

Angie was the originator of the critical companionship concept. The concept, which arose during her research with Alison Binnie in the nineties ([Binnie & Titchen, 1999](#)), was [developed and refined in her doctoral research \(Titchen, 1998\)](#). She saw this programme as an opportunity for aspiring consultants, not only to experience co-learning through co-

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inquiry with their external facilitator but also, trying it out with other participants in their small group sessions. Another opportunity was to help participants understand that, over time, they would be able to use the critical companionship role or its processes and strategies within the various roles (domains) of consultant practice.

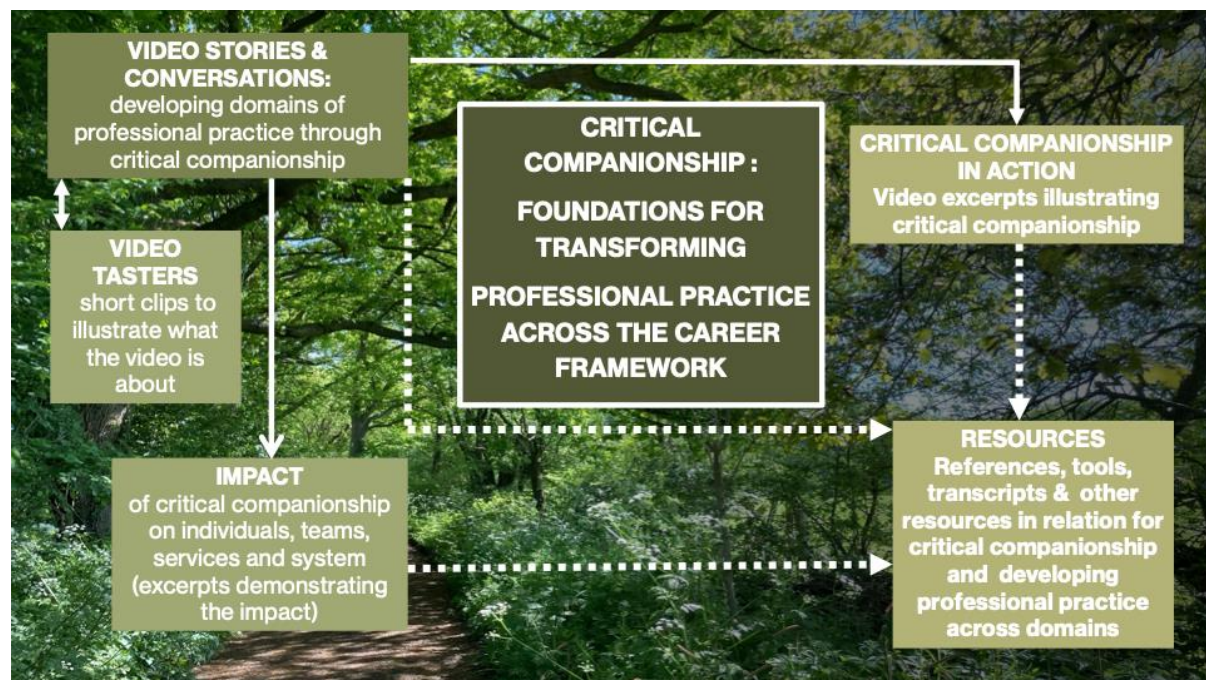
Kim, previously a consultant practitioner and embedded researcher herself, offered to help Angie develop and facilitate the programme strand and build on the UK-wide consultant nurse development programme we had facilitated and researched together over a decade earlier (see Manley & Titchen, 2011, 2016). To help us, we invited an international multiprofessional team of colleagues, with whom we had worked over the years in various roles as critical companions. They had gone on to develop critical companionship in their own health, social and education professions. As person-centred practitioners, strategic leaders, researchers, university or workplace educators or consultant practitioners, they created videos in which they shared their own experiences of becoming and being critical companions. The videos were piloted in the programme with agreement that they would subsequently become freely available online and potentially go beyond the consultant practitioner career progression to other professional roles. Some of these colleagues also helped us facilitate small, online group work sessions with participants during the programme.

We conclude from our experience, that whilst the videos and resources were made for the aspiring consultant practitioner programme, they could be useful to professionals wanting to become critical companions in their own professional roles, contexts and settings. They are freely available to health and social care professionals to use in their professional work.

If you wondering what critical companionship is, [here is an introductory slide show](#) and there are [starter references here](#).

GUIDE COMPONENTS

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The components of this Resource Guide include videos, creative imagery, articles, transcripts, learning tools, recommended reading and references. They are tailored for each of the five domains of multi-professional consultant practice. In addition, there is a Main References guide and Impact section which is relevant across all the domain

WHO IS THIS RESOURCE GUIDE FOR?



Health and social care partner organisations to support workforce development and transformation

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Facilitation expertise is one of the three key workforce enablers required for whole system workforce transformation (Manley et al, 2014). It is catalytic for increasing effectiveness in consultant practice and systems leadership (Manley & Titchen, 2016) and is one of the arms of the Venus model for sustainable person-centred whole system workforce transformation (Manley & Jackson, 2020).

Critical companionship is an approach to facilitation that focuses on creating the conditions and cultures for person-centred, experiential facilitation in the workplace relevant to many aspects of professional work, as well as the five domains of consultant practice.

Critical companionship has its early origins in the swampy lowlands of practice and the research, 'Freedom to Practice' (Binnie & Titchen, 1999).

This resource will enable health and social care organisations to:

- **Prepare experienced practitioners, within the organisation or outside, as critical companions through experiential programmes of support.** This is important because experienced practitioners are likely to be skilled for example, in clinical supervision or mentorship, which are different from critical companionship. For example, critical companionship is non-hierarchical and focuses on mutual co-learning and co-inquiry relationships with health and social care professionals, citizens, peers, partners and stakeholders. These relationships are necessary for system transformation that meets the needs of people, communities and what matters to them.
- **Support health and social care staff aspiring to become multi-professional consultant practitioners** as systems leaders, embedded researchers and contributing to workforce development and transformation.
- **Enable opportunities for staff to use critical companionship within their working relationships with colleagues and the people using their services**, for example, the Integrated Multiprofessional [Clinical Leadership Programme](#), led by Kim Manley at East Kent Hospitals University NHS Foundation Trust in which Karen Hammond (a midwife) facilitated a surgeon using critical companionship ([see video](#)) and Claire Hardwick ([see video](#)) a speech and language specialist developed from experiencing critical companionship to enabling others with its principles. Four different professions (a psychiatrist, a nurse, a microbiologist and a speech and language therapist) demonstrate the impact of this programme on moving their workplaces from fractured to flourishing cultures in McKeller et al ([2021](#)).

This resource will enable universities, professional bodies and charities to:

- Develop experiential, 'practice-first then theory' programmes for health and social care professionals (in collaboration with health & social care partner organisations)
- Support individual accreditation of portfolio/other evidence of workplace capabilities and impact.

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This guide will enable health and social care practitioners, clinical supervisors, aspiring consultant practitioners or service leaders to:

- develop their own skills as critical companions in their workplace

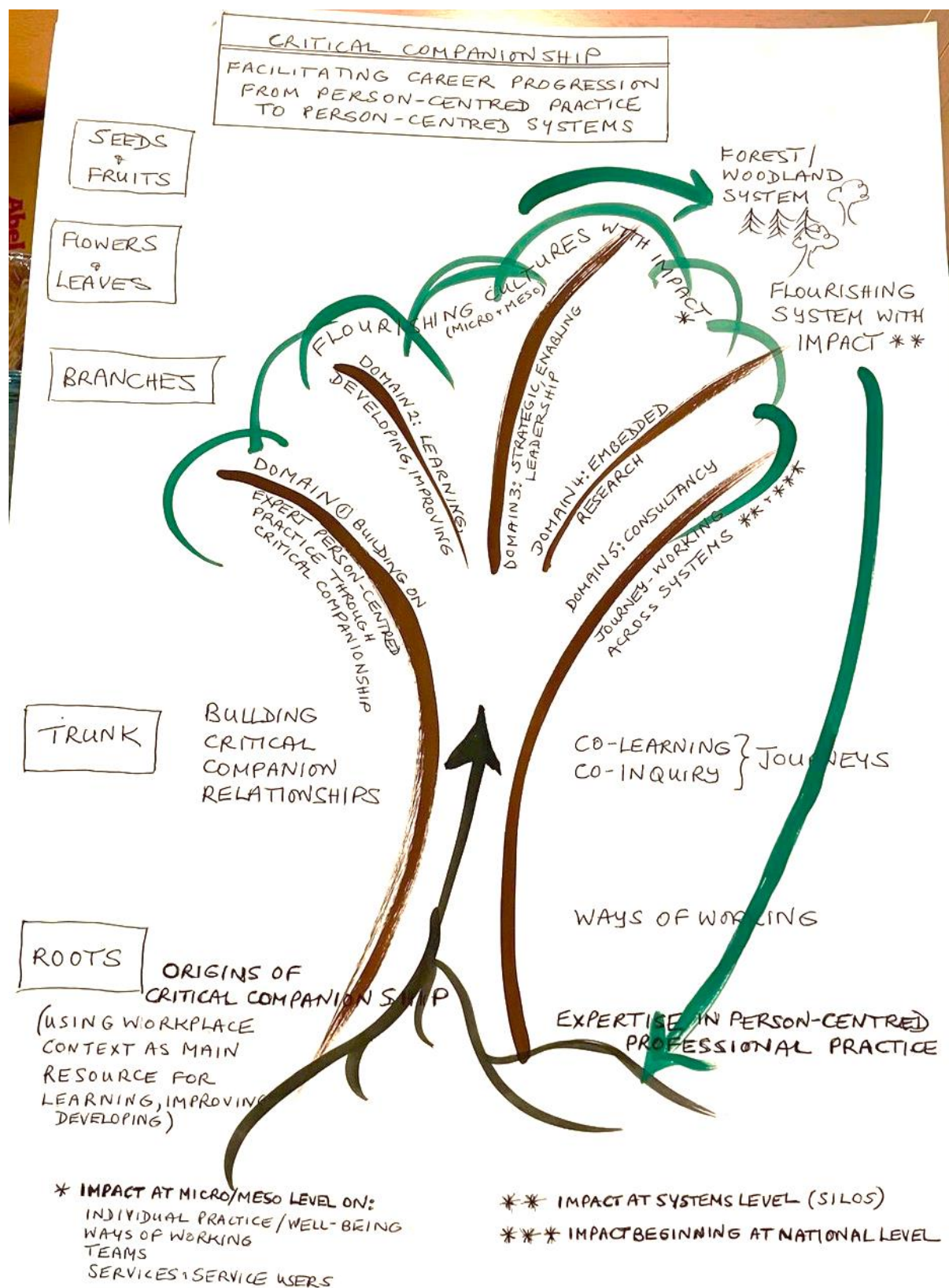
This person-centred guide is NOT a ready-made course or programme, but of course, it could be used to contribute to one!

SYMBOLISM & STRUCTURE OF THE GUIDE

In this guide, we use the metaphor of a tree in an ecological system to:

- Symbolise a career progression journey for health and social care professionals moving from micro level (*professional practice with service users and colleagues*) through mezzo level (*working at organisational and local levels*) to macro (*working across systems at local, regional, national and international levels*) (see McCormack et al, 2008)
- Structure the relevant videos and resources for the micro to macro career progression
- Provide easy access to videos by putting the numbers along the branches of the tree as in our earlier drawing.

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- * Impact at micro/mezzo level
- ** Impact at systems level
- *** Early Impact at national level

THE CAREER PROGRESSION JOURNEY

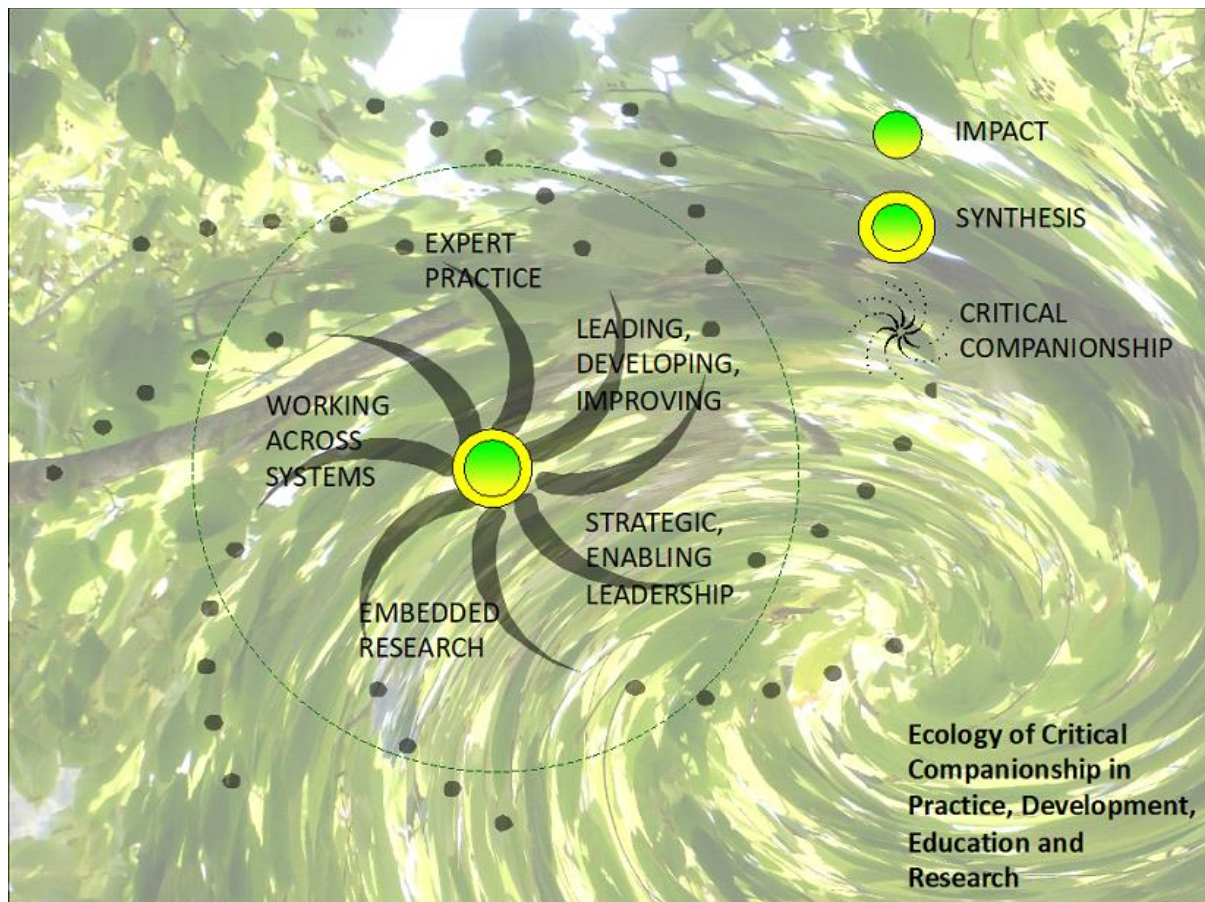
Like a tree, this journey has 'roots' which are introduced in the Domain 1 video conversations exploring the origins and experience of critical companionship over time. The 'trunk' of our metaphorical tree symbolises the building of person-centred critical companionship relationships and learning how to learn experientially through co-learning and co-inquiry journeys.

The tree has five 'branches' which symbolise the five Domains of consultant practice (<https://advanced-practice.hee.nhs.uk/consultant/>). Each Domain contains its relevant videos and resources. Starter and main references to published work about critical companionship across the domains are also offered.

The branches (domains) are connected, via the trunk, as people develop their skills and expertise which are likely to be carried forward and back through the branches in a kind of synthesis or dance, if you like!

- Domain 1: Building on Expert Person-centred Practice through Critical Companionship (tree roots, trunk, Link to Starter References (branch 1))
- Domain 2: Learning, Developing and Improving (branch 2)
- Domain 3: Strategic, enabling leadership (branch 3)
- Domain 4: Embedded research (branch 4)
- Domain 5: Working across systems (branch 5)

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Relating to our woodland ecological system metaphor, the flowers and leaves symbolise the growth of ‘flourishing cultures with impact’. Moreover, through the production of seeds and fruits, this tree contributes over time to growth of the whole forest/woodland system which in turn, nourishes and enhances, through our tree’s roots, the workplace context.

In the programme for which this guide was originally developed, applicants had already demonstrated that they had expertise in person-centred professional practice at micro level. As far as we are aware, none of them had done this supported by a critical companion.

Therefore, in Domain 1, we offer:

- Two video stories of whole journeys (from micro and mezzo levels to working across systems at macro (consultancy) level) and being a critical companion along the way
- A link to Starter references for setting out on the journey to critical companionship.

Domains 2-5 follow a structural pattern:

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- Videos demonstrating the domain in action in different professions, settings, contexts and countries in relation to the five branches of the tree
- Links to:
 - Main References (relevant across domains) - annotated to help people identify which paper or book chapter is helpful to them at their point in the journey
 - Starter References (annotated)
 - Recommended reading for a particular branch/domain
- Links to resources particular to a domain
- Links to resources, e.g., articles, learning materials/tools

WHAT ARE THE IMPACTS OF CRITICAL COMPANIONSHIP?

The [Impact videos, references and resources](#) in this guide show the impacts of critical companionship on individuals, teams, service users and those providing health and social care services, within practice, practice development, education and research contexts.

Demonstrating impact is defined by Belcher and Halliwell (2021 p2) as *‘any change caused in whole or in part by an action or set of actions, including research actions*. The important role of collaboration and partnerships with stakeholders in co-creating and advancing the use of research-based knowledge and practice is at the heart of both the MPCP capabilities and critical companionship.

We have therefore distilled short examples from various critical companionship videos to illustrate impact at different levels of Belcher and Halliwell’s impact continuum. This resource, [Critical companionship: positive impact at micro, mezzo and macro levels for communities and workforce](#) shares videoclips within a narrative that introduces the different levels of impact identified by Belcher and Halliwell and applies them to illustrating the impact of critical companionship.

In addition, there are three other resources relevant to impact:

1. [Application of critical companionship](#) and its impact and Unique Selling Point (USP) of critical companionship with an exemplar of USP in action.
2. Critical companion role in clinical leadership development – [Interview with East Kent surgeon](#) with Karen Hammond asking the questions.

HOW CAN I ACCESS AND USE THESE RESOURCES?

Although the materials were created for the MPCP programme for multi-professional aspiring or consultant practitioners, the videos and resources are flexible and relevant to

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practitioners in any health or social care context, role or wherever they may be in their career progression.

Video makers have donated their videos/materials to NICHE on the University of East Anglia website. Whilst the individual ownership of the intellectual property remains with the respective donors, they have agreed for these to be made freely available. This means: (1) there is no payment for use of the videos/materials; (2) permission to use them does not have to be sought from the donor and (3) people can choose to use them either unmodified, or tailor them according to their specific needs and contexts.

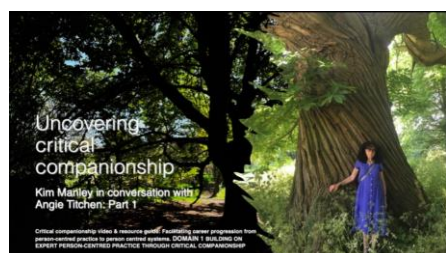
This *Critical Companionship Video & Resource Guide* is hosted by the Norfolk Initiative for Coastal and rural Health Equalities (NICHE, [School of Health Sciences](#)), which has been funded by Health Education England (East of England). The co-directors, Professor Sally Hardy and Professor Jonathon Webster and Joanne Odell, NICHE Senior Research Fellow, have been long involved in critical companionship and its development.

VIDEO TASTERS (you can find out about the [video makers here](#))

Critical companionship processes being used in these video tasters are indicated in bracketed *italic*, e.g. ([Mutuality](#)). *A more comprehensive pointing out of CC processes in the videos can be found here.*

Domain 1: Building on expert person-centred practice through critical companionship

[Video 1 - Uncovering critical companionship - Part 1: Kim Manley in conversation with Angie Titchen](#)



Angie created the concept of person-centred facilitation embedded in the role of critical companionship, first from her own physiotherapy practice roots, and then her doctoral research ([Titchen, 2000; 2001](#)). She continued her exploration of the concept in her: Education Consultant role at the Chartered Society of Physiotherapy; Senior Research and Practice

Development role at the Royal College of Nursing; professorial roles in Australia, Northern Ireland and the Netherlands and Independent Practice Development & Research Consultant role. Alongside contemporaries, including Kim Manley, Brendan McCormack and Jan Dewing, Angie has been a critical companion to many in the UK and around the world.

Kim, one of the founders of consultant nurse practice in the UK, operationalized and researched the role in a Kings Fund Nursing Development Unit. She took forward the learning from this research to inform many projects as Head of Practice

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Development at the RCN Institute and latterly as Professor of Practice Development and Transformational Research at the England Centre for Practice Development at Canterbury Christ Church University and the ImpACT Research Group at the University of East Anglia. Kim and Angie have worked closely together enabling and researching critical companionship in expertise in professional practice (Titchen, 2009) and in the development of consultant practice (Manley & Titchen, 2011, 2016) (in Main References)

Video 2 (short and long versions) - Journey to consultant Practitioner and beyond: *Jonathon Webster in conversation with Angie Titchen*



Jonathon Webster, Professor of Practice Development and Strategic Lead for Research and Scholarships at NICHE, paints the big picture for us and the path he created from the very early days of consultant practice. He places great emphasis on the critical companionship *Relationship* domain and starting at a place where people are at.

Jonathon was one of the early adopters of critical companionship and he has gone on to have a very distinguished career working across systems, nationally in the UK and at international levels. (<https://www.linkedin.com/in/dr-jonathan-webster-92b76863/?originalSubdomain=uk>)

For this reason, we have two versions of Jonathon's video – a short one which provides an introduction and a longer version where more of his extraordinary journey is explored, undertaken with humility and grace.

Domain 2: Learning, developing, improving

Video 3 – Impact of critical companionship on others: *Karen Hammond & Angie Titchen in conversation*



Karen is a midwife and critical companion at one of the largest NHS Trusts in England. She shares how she helped a Consultant Surgeon become a critical companion to his own team and the positive impact this had on patient care. This video is a beautiful exemplar of a non-hierarchical relationship through the critical companionship domain of *Mutuality*. Karen

and Angie often experienced their critical companion creative learning and inquiry walking on city streets and in hospital grounds!

Video 5 - Compassionate conversations: *Mary Mulcahey & Kylie Richardson*

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Mary is a hospital-based nurse educator of person-centred practice and Kylie, a senior dietitian & Organizational Development Consultant, in Australia. They show the importance of *Creating safe, creative learning and inquiry spaces* that are essential for cultures in which we can flourish through crises and difficult times (*Human flourishing*).

Video 7 - Being a critical companion to a nursing home team developing their practice: Working through an internal/external relationship: *Famke van Lieshout*



Famke, a university lecturer, at Fontys models something of Caplan's (1970) consultancy model in her external facilitator role in an embedded, participative action research inquiry in a community setting. Her story reveals how she focused on *Saliency* (what matters to people) and *Temporality* (timing, timeliness). She *Role-modelled* and *Articulated* the practical knowhow of critical companionship to the internal facilitator at the same time.

Video 8 – Critical companionship - A walk in the woods: *Lorna Peelo-Kilroe, Director of Nursing, Health Service Executive, Republic of Ireland & Angie Titchen*

with
in



Lorna started on her critical companionship journey with Angie by walking together in the Botanical Gardens Belfast. We continued in this tradition because it enhanced our getting to know each other as people (*Particularity*) and working, learning and inquiring together (*Mutuality*). Carrying this tradition over

into her collaborative Health Service Executive work Lorna found it was also helpful for the creation of flourishing cultures.

Video 10 - Critical-creative retreat - Developing symbols and metaphors from nature to inform inquiry questions: *Margaret Codd, Human Factors Lead, Health Service Executive, Republic of Ireland & Angie Titchen*



Critical-creative retreat

We share the power of working with the whole of ourselves at an occasional retreat at Angie's home and in the Oxfordshire countryside.

Video 11 - Learning, becoming and being an effective critical companion: *Michele*

Hardiman, Education & Research Facilitator, Galway Clinic, Republic of Ireland



Part 1: Transforming culture, relationships, practice and systems through critical companionship means learning to transform oneself first

Through her own critical companionship with her doctoral supervisor, Jan Dewing, Michele realizes early on that she must first change herself first, if she is to have any impact on transforming her workplace and helping staff to become person-centred practitioners.



Part 2: Development of critical allies and critical friends: Steps towards critical companionship with positive impact on culture and clinical service

Daunted by the language and complexity of critical companionship, Michele decided to use her doctoral research to develop, as a pathway for beginners, the less daunting roles and language of critical ally and critical friend in the workplace as a means to becoming critical companions over time. She describes how, as a leader, she helped people develop these roles and was able to show the impact of this on the service and the culture.

Video 12 - Using Critical Companionship in everyday situations: Donna Frost is a university educator and programme leader, Fontys University of Applied Sciences, The Netherlands



Part 1: Challenging self to live ways of working that are person-centred and evidence-based through critical companionship

Donna shares how a critical companion works informally in the everyday, with the who you are, wherever you are – even in the canteen with colleagues who are bitching (her words)! This example shows how *high challenge/high support* works in the everyday and the effort required as a person.



Part 2: Using Critical Companionship in everyday, more formal relationships: Reflections on living ways of working that are person-centred and evidence-based

Donna demonstrates how critical companionship can be used in a formal role, to inquire into our own practice with peers (embedded research).

Domain 3: Strategic, enabling leadership

Video 1 - Uncovering critical companionship - *Part 2: Collaborative Development of Strategic Approach: Kim Manley in conversation with Angie Titchen*



In this short continuation of Video 1, Angie shares her experience of developing a collaborative approach to developing strategic enabling leadership in the Netherlands.

Video 6 – Creating safe spaces for becoming and being a person-centred leader: *Mary Mulcahey & Karen Tuqiri in conversation*



Mary is a nurse educator of person-centred practice and critical companion to Karen Tuqiri, her Director of Nursing in a hospital in Australia. They examine how Mary has enabled Karen to develop her strategic enabling leadership role. They also *Role-model and Articulate* for us how they work in an authentic, flourishing critical

companionship relationship between equals, in roles that are traditionally hierarchical (*Graceful care, Reciprocity*).

Video 13 - Becoming a strategic, enabling leader through critical companionship in two parts: *Clare Hardwick & Angie Titchen in conversation*



Claire is Associate Director of Therapy services and a Speech and Language Therapist at an acute hospital trust in the UK. Claire explains that critical companionship is not about fixing or telling, rather that it is helping staff to decide what they want to change and find their own answers through enabling *Self-reflection and Critique*.

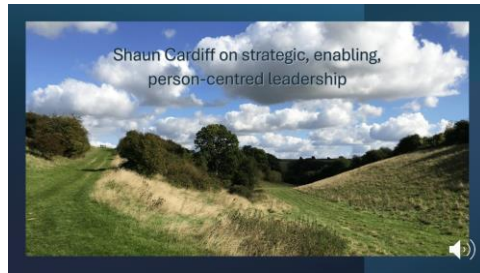
Part 1: Experiencing critical companionship through a clinical leadership journey

Part 2: Developing flourishing cultures through critical companionship and enabling strategic leadership

Video 14 - Strategic, enabling, person-centred leadership: *Shaun Cardiff*

Shaun is a university Senior Lecturer and Programme Lead in The Netherlands. He shares his doctoral research on person-centred leadership, illustrating the nature of strategic enabling

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leadership and how critical companionship is embodied within this. He points out the critical companionship strategies that he uses in his own leadership practice.

Domain 4 – Embedded research

Video 16 – Being embedded researchers in co-inquiry in 2 parts: *Margaret Codd & Lorna Peelo-Kilroe*



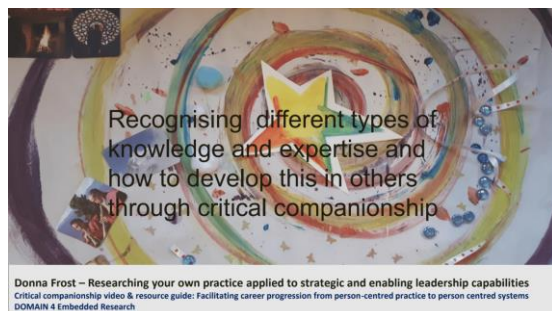
Margaret, a quality improvement facilitator & Lorna Peelo-Kilroe, a director of nursing, both at the Health Service Executive, Republic of Ireland got started on their critical companionship journeys by working in nature and on short retreats with Angie. These initial ways of meeting enhanced our getting to know each

other as people (*Particularity*) and working, learning and inquiring together (*Mutuality*). These occasional meetings were vital for the creation of flourishing cultures in their collaborative national work over many years.

Part 1: The essence of embedded research linked to co- learning

Part 2: How do you know you are making a difference as embedded researchers who are co learners working strategically?

Video 17 – Researching your own practice: *Donna Frost*



Donna is a lecturer & module co-ordinator, Master Advanced Nursing Practice programme, Fontys University of Applied Sciences in the Netherlands. Building on her doctoral research, Donna shares the how and why of researching our own practice. She gives examples of her study in which healthcare practitioners, over extended periods of time, researched their own

practice. This enabled them to see things differently and consider the impact of their practice on others and the system, alongside developing insight into what worked well and what didn't. Donna provides useful references at the end of her video that are a useful adjunct to those in the Domain 4 Resources section.

Video 18 - Critical Companionship between an internal and external facilitator of a participatory action research (inquiry): *Famke v. Lieshout with Angie Titchen*



This video picks up from Video 7. Famke continues the story by sharing the participatory action research inquiry around person-centred care and relationships with the team in the Care Innovation unit and nursing home. The team identified that they were challenged with ‘working from the heart’ in their relationships with patients. They decided that they wanted to engage in a development programme for improving these relationships, together with Chrystal, the internal facilitator, and Famke, the external facilitator from the university. There is a strong focus on enabling genuine participation and co-creation.

Domain 5

Video 19 – Working with systems: *Alex Fink*



Alex is a university teacher, researcher, and Assistant Professor -who supports participatory & youth-led work for social change in the United States. He shows how working across systems, multiple boundaries and different players can be facilitated through embedded research and, specifically, through participatory action research. In this video, Alex shares his critical

companionship story of working with disadvantaged young people in a marginalized, rural community in Minnesota, in the US and how they were able to bring about systems change (at mezzo level) by working with the City Council.

Through using approaches underpinned by critical creativity and the SYSTEM acronym, young people, in a context of very little power or money, were helped to become highly engaged in the process, gain leadership experience and undertake embedded research to underpin the case they put to the City Council. This facilitation enabled these young people to change the negative view that adults within their community held about them; to have a voice in influencing City Council policy and in gaining funding for a new youth service that empowered them. Another key result was that the City became involved in the issues brought forward by the young citizens and changed the way it worked.

Video 20 – Dismantling silos through working differently: Margaret Codd & Lorna Peel-Kilroe



We introduced you to Margaret and Lorna in the Learning, Developing & Improving Domain and the Embedded Research Domain. A year or so on in their stories, they are presenting evidence that they are enabling senior executive and service leaders to dismantle their siloed corporate world ways of thinking and working. They role-model reflexivity as

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they talk together about the vulnerability that they, as well as the executive and service leaders, felt when taking the plunge into different ways of working at systems level.

At this time, Lorna and Margaret were working on a National Programme for Person-centred Care with Brendan McCormack. They give an example of how Brendan role-modelled for them how they could help leaders in an acute hospital to overcome fear and vulnerability and step into new ways of working together. This experience with Brendan engendered confidence in Margaret and Lorna, who, on future site visits to different organisations were able to help people begin to transform hierarchical and corporate world ways. In addition, they share how they worked differently with their Patient Partners at national corporate level and the delight, as well as the new challenge, that arose.

IMPACT VIDEO

Impact video - Critical Companionship: positive impact at micro, mezzo, and macro system levels for communities and workforce - *Kim Manley & Angie Titchen*

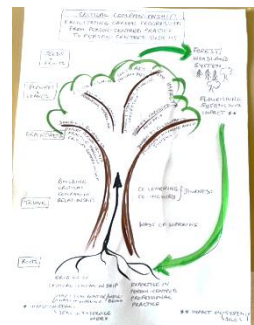


In this video Kim presents the definition of impact used in our work and sets out the positive impact that critical companionship has had on practice at micro, mezzo and macro levels. These levels take us back to our tree for you to judge whether our tree ecology holds.

We leave you with key messages

and Impact references and resources to go forward on your own journeys.

Go well!



ORGANISERS/FACILITATORS' REFLECTIONS ON THE PROGRAMME

Reflections by members of the team who created the MPCP programme are offered to help others who wish to design critical companionship programmes.



The UEA team who developed and co-facilitated the programme, consisted of Carrie Jackson, Kim Manley and Renee Ward. In the critical companionship strand, small groups were facilitated by Kim, Renee and Angie. Their reflective summaries of the programme include the impact of critical companionship on participants.

- Carrie: The programme impact was extremely powerful listening to the stories of consultant and aspiring consultant practitioners from a broad range of professions and contexts talking about how it has shaped their career plans and evidencing their personal professional impact as systems leaders in the East of England. Critical companionship provided them with the high challenge and support they needed during their journey of discovery and helped to guide their reflection and learning.

I felt very privileged to be co-facilitating this programme with such an amazingly talented team and could really see that the fantastic partnerships and relationships we had built across the region helped to deliver an initiative that would make a difference to so many.

- Kim: My reflections are about the importance of developing critical companionship skills and expertise as a consultant practitioner through experiencing it. The impact this can have on enabling others to become more person centred, collaborative, inclusive, participative and effective in their work is pivotal to enabling our health and care systems to focus on what matters to people – our communities and workforce. By experiencing critical companionship across different professions, we not only learn to value and appreciate what others have to offer, but also genuinely begin to work together for learning and inquiry that benefits all.

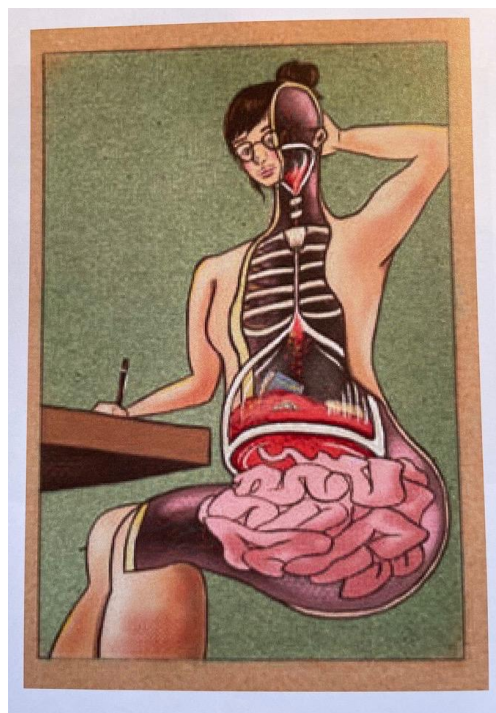
Through patience, perseverance and dedication to refining the resources, we have learnt that from acorns, great oaks can grow, and forests can flourish. This is our metaphor for consultant practice applied to systems leadership and embedded research, as well as workforce transformation, symbolising how all can flourish through relationships, mutuality and skilled facilitation.

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- Angie: It was brilliant working with the video makers and aspiring consultant practitioners, all working in different contexts and professions. It confirmed for me that critical companionship is a generic framework for person-centred, experiential facilitation. However, one of the perennial problems when the critical companionship framework is introduced is the conceptual language!! And this happened again here. I understand that and I try to help people, at the beginning, by saying that it is the meaning that is important to focus on and not the language.

‘When we were first introduced to the idea of critical companionship, we thought “duh!” what on earth is that!..... And then... “What would we ever want it for!!?” However, as with all new ideas, and as encapsulated in the proverb, “you can’t eat the elephant in one bite” we decided not to try but to take it nice and slow...bite by bite.’ (Gribben & Cochrane, 2006)

And to build, bit by bit, an understanding of the whole. When I see one of the concepts being played out in front of us, I point it out and encourage digging down to the practical know-how behind it. Michele describes the power of this in her video and how the meaning becomes embodied over time.



Vanessa Tam, Occupational Therapy

Digestion takes a long time.
However, it assists us in maintaining our health for as long as it takes. It is critical to digest new knowledge slowly before moving on to the next step in the learning process.

UEA School of Health Sciences Art Exhibition, 2022

The reason I haven’t changed the critical companionship framework for this guide (or over the years) is that it provides a holistic, concise embodiment of something very complex and often invisible, and can be used as shorthand during ‘bedding in’ conversations with our companions. Unfortunately, in the small groups of this programme there wasn’t enough time to fully explore and unpick the strategies and processes used by participants as they shared their stories of progress, challenge, success and failure, so more time needs to be built in. Moreover, it is important to know that it does take time to digest and embed new knowledge, as occupational therapist, Vanessa Tam, shows in her painting above. Slowly, it infuses our roles, formal and informal, and practices.

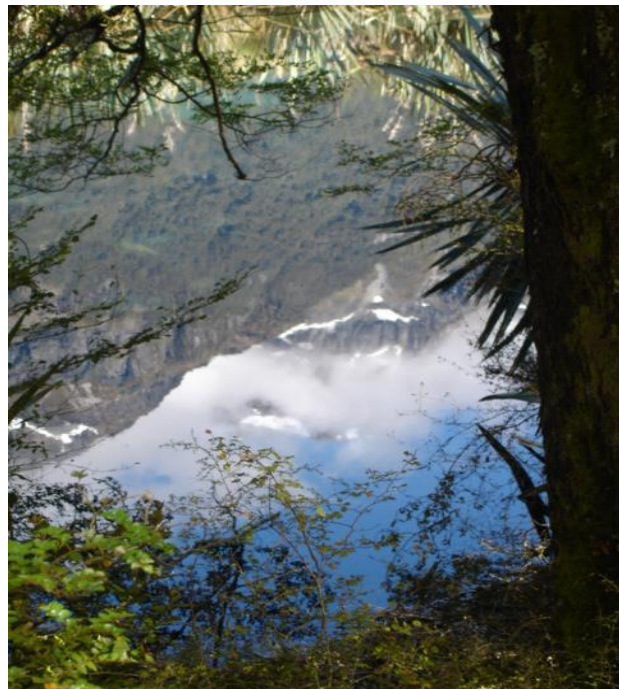
EVALUATION

This section is in two parts. The first offers self-reflection questions that were created for the programme participants. They may be useful to you for facilitating your own and others' learning and for evaluating your progress over time.

The second part comes from the final evaluation of the whole programme, in relation critical companionship (CC).

1. SELF-REFLECTION QUESTIONS

- Was I intentional in using any of the processes/strategies in the CC framework?
- On reflection, did I spot any of them in myself or others in my group?
- Did I or any of the others point them out in the moment?
- Do I notice myself doing this now in my everyday practice?
- When I watch the videos, am I looking for CC processes and strategies in the stories?
- Am I able to see any of the CC domains (processes and strategies) emerging as I am working on my MPCP priority area of development? Am I intentionally trying out the CC domains and inquiring how they work?
- Does the CC framework help me articulate my practical knowhow of facilitating person-centred clinical practice, learning or inquiry?
 - Has it given me language to describe the expertise and practical know-how that I never talk about because I take it for granted and see it as commonplace?
- Has CC increased my sensitivity/enabled me to go deeper into understanding myself, others, context etc?
- Am I more in touch with my intuition, noticing what I notice and seeing that as mattering and combining it with my rationality?



- Have my relationships become more person-centred, collaborative and mutual?
- Am I using the facilitation processes of role-modelling observing, listening, questioning, critical and creative dialogue with self and others?
- Has my self-knowledge and reflexivity grown? Do I ask for feedback?
- Do I act with humility, grace, kindness in challenging situations?
- Am I nurturing others and myself? How do I do this?
- Have I accessed any of the CC references and resources to widen and deepen my understanding?

2. FINAL MULTI-PROFESSIONAL CONSULTANT PRACTICE (MPCP) PROGRAMME EVALUATION

Unfortunately, none of the critical companionship team were present at the final evaluation of the MPCP Programme to put forward views. We received this brief report from Carrie Jackson.

‘In the evaluation at the end of the programme, the East Suffolk & North Essex Foundation Trust (ESNEFT) programme group identified that whilst they really appreciated learning about the theory of critical companionship and will be sharing some of their stories at the celebratory conference, they have asked us to embed an alternative model in future cohorts. We are proceeding with a practice mentorship model taking some of the principles of CC forwards instead and using Action Learning as our model of application to practice. The programme will continue with the existing participants from Cohort 1 acting as mentors to those in the second programme.’

Angie replied to this report: ‘This is really good feedback and a decision to move forward with a practice mentorship model informed by aspects of critical companionship sounds a very good first step to me.’

Kim added: ‘It is really good feedback about the decision to move forward with a practice mentorship model informed by aspects of critical companionship which sounds a very good first step. Practice Mentorship is defined as “A learning relationship which helps people to take charge of their own development, to release their potential and to achieve results which they value” – ([Connor and Pokora 2007](#))

Whilst we understand that participants desire to change the focus towards practice mentorship we just wished to responsibly point out the consequences of this in light of the above definition which is absolutely in tune with critical companionship, but lacks a strong focus on the values of a) mutual inquiry and learning so evident in one of the conference

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presentations, (b) non-hierarchical relationships and c) being person centred; and the impact on health services demonstrated in the work of Hardiman & Dewing (2014) and Akhtar et al. (2016) so integral to the focus of consultant practice. In addition, the term will be sadly 'out of synch' with the national development pathway with its focus on critical companionship as these values are integral to the multiprofessional consultant practice developmental pathway as both a key enabler and focus.



At the celebration conference, participants' presentations were positive. Kim and Angie were so pleased to hear of the many achievements in all the Consultant Practice domains and to hear CC being referred or alluded to in most presentations and greatly encouraged by the two specific CC presentations and discussions - one of which is mentioned above with a link. This link also includes the Unique Selling Points of critical companionship and notes the flexibility of CC to be synthesised with mentorship, clinical supervision and coaching.

Since the conference, the national programme in England for multiprofessional consultant practice is taking forward critical companionship to further embrace clinical supervision. The complementary relationship between the two is described in a dedicated resource (v6.1 document will shortly be available on NHS website and the link will be inserted here in due course). Both are recognised for supporting the development of multiprofessional consultant practice and its associated capabilities. Critical companionship is particularly important for co learning and co inquiry which is vital as multi professional consultants are system leaders working with system partners using co production with all at every system

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level. Developing effective workplace cultures where everyone can flourish is an essential enabling factor towards this end. Critical companionship demonstrates impact on culture across all the videos in this resource enabling not just a flourishing workforce but also the quality of care associated with this.

DEDICATIONS & THANKS



In gratitude, Angie would like to dedicate her part in this final work to those who helped her develop critical companionship in the early years and in a variety of ways:

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And to those with whom I have walked alongside and have made videos for this programme:

Lorna Peelo-Kilroe, Mary Mulcahey, Famke van Lieshout, Clare Hardwick¹, Michele Hardiman, Karen Hammond, Donna Frost, Alex Fink, Margaret Codd, Shaun Cardiff.

¹ Clare and I met for the first time when we made the video!

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Thanks also to: Carrie Jackson for inviting me to contribute to the Multi-Professional Consultant Practice programme, Sally Hardy and Jonathon Webster for offering to host this Guide on the NICHE website; Jo Odell, also at NICHE, for helping us prepare for launching the resource and going live; all who contributed imagery for the videos; Barry Hunt of Hunt Films, Eire, who edited the videos and the UEA website team, Idris Phillips-Fry, Scarlet William and Joe Collins for transforming our material into a website.

Kim is also grateful to the many opportunities she has been given and the support she has been provided by colleagues and friends across her own path of development linked to developing flourishing cultures through skilled facilitation, enabling leadership and multi professional consultant practice. There are so many individuals to name so instead I have identified those workplaces in which this journey of mutual learning and inquiry happened: The Institute of Advanced Nursing Education, Royal College of Nursing; The Chelsea & Westminster Nursing Development Unit/Intensive care Unit; The Practice Development Team, RCN Institute; The International Practice Development Collaborative; The England Centre for Practice Development, Canterbury Christ Church University; ImpACT Research Group, University of East Anglia; Health Education England National Team Multi-professional Advanced and Consultant Practice.

Kim would also like to recognise the support, commitment and informal critical companionship provided by Angie Titchen since the mid 1990s when we were both working at the RCN Institute. We were experiencing parallel doctoral research journeys at the time using participatory action research (which was a rare research approach used in healthcare then!). At the beginning, little did we know that there would be so many shared insights between *Freedom to Practice* and operationalising and researching the consultant nurse role and the transformational flourishing cultures that result.

