ThinkOn

NHS

IMPACT REPORT

THINKING BIGGER BETTER BOLDER® PROGRAMME

Delivering A Measurable Difference in just 90 days

Certified B Corporation

THE CHANGE & BUSINESS IMPROVEMENT SPECIALISTS

PRODUCTIVITY & PERFORMANCE

Improve productivity and performance through our Results Acceleration 60 and 90-day Go M.A.D. challenges. We enable your leaders to apply our proven solution focused methodology to critical business issues to deliver a guaranteed **measurable Return On Investment**.

CHANGE MANAGEMENT

Equip your leaders with the necessary frameworks, tools and skills to successfully **support teams through change** - saving both time and money. We focus on the people side of change to handle uncertainty and reduce resistance, ensuring that teams bounce back up the change curve.

CULTURAL TRANSFORMATION

Transform your culture by engaging your people with the only programme in the world to **deliver quadruple impact** across your organisation and beyond. We work at speed to ensure performance improvement, enhanced leadership capability and team development, plus wide social impact.

LEADERSHIP CAPABILITY

Provide 'shared mental software' by embedding our practical problem-solving tools and proven success frameworks. These enable your leaders to engage and empower their teams to have more purposeful and productive conversations, equipping them with the necessary mindset to **solve problems and improve results.**

UNDERSTANDING THE REASON WHY

In the rapidly evolving healthcare landscape, there is an increasing demand for nursing leaders to step into more strategic, solution-focused roles. This requires a shift towards greater accountability, innovation, and collaboration at all levels. The Nursing Leadership Programme is designed to equip leaders with the skills and tools necessary to meet these challenges, ensuring they can lead teams effectively, drive improvement efficiently and deliver high-quality care in alignment with organisational goals.

- Nursing leadership must strengthen accountability and cohesive teamwork by actively engaging in improvement objectives that drive care quality and service efficiency.
- Leaders in nursing require the skills to ask insightful questions that challenge existing practices, encouraging innovative, solution-focused thinking to address pressing healthcare challenges.
- A shared language of problem-solving and results transformation must be embedded throughout nursing management to ensure consistency and alignment in achieving patient care outcomes.
- Nursing leaders require practical tools and techniques that can be applied on the ground to enhance both individual and team performance, ensuring wards operate at their highest level of productivity and care delivery.
- The effectiveness of meetings and team interactions must be improved by embedding structures that ensure preparation, purpose, and outcome-focused facilitation, leading to more purposeful and productive decision-making.
- It is critical for nursing leaders to develop the skills to define and drive key priorities that align with the department's vision, values, and culture, fostering a collective responsibility for delivering outstanding patient care and continuous service improvements.

HOW DOES THE 90-DAY THINKING BIGGER BETTER BOLDER® PROGRAMME WORK?

PRE-LEARNING: BUILDING LEADERSHIP AND CHANGE MANAGEMENT SKILLS

Leaders receive three months access to the ThinkOn® leadership productivity mobile app. This app includes an extensive library of over 105 practical, bite-sized learning modules and self-assessment sessions designed to develop leaders, coaching, and change management skills. The pre-learning phase ensures leaders have a strong foundation, enabling them to apply learning to real-world scenarios for immediate impact.

DAYS 1 & 2: MASTERING THINKON'S 'THINKING SKILLS' METHODOLOGY

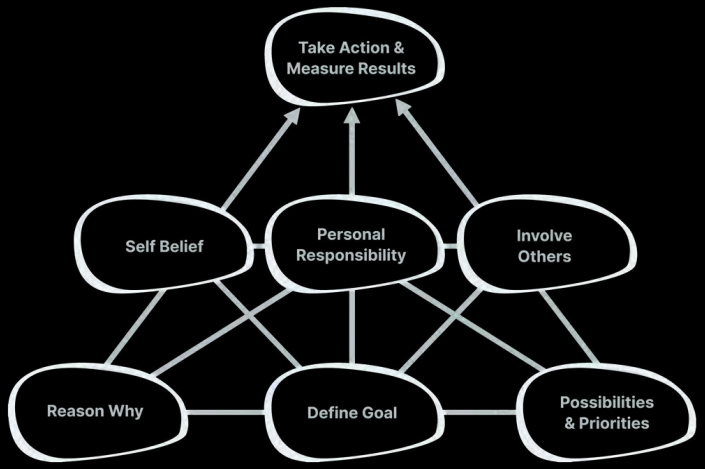
Leaders start their journey by aligning on critical issues and shared goals, transforming their thinking by understanding the powerful link between thoughts, actions, and outcomes. They delve into the ThinkOn® Results Framework, applying seven essential principles for success. Throughout the process, leaders learn four effective goal-defining techniques, two dynamic methods for possibility thinking, and how to craft high-quality questions to solve problems. Additionally, they master a practical coaching framework. The initial two-day programme concludes with leaders developing a robust 90-day improvement plan to ensure sustained progress.

DAY 3: DYNAMIC 45-DAY REFRESHER AND PROGRESS ACCELERATOR

Leaders reignite goal momentum with an intensive face-to-face facilitated workshop designed to help leaders embed sustainable practices using the 'Thinking Skills' methodology, tools and techniques. This workshop refreshes goals, reinvigorates knowledge, and helps leaders overcome any mental barriers. Leaders apply insights effectively in 1:1 and team contexts to drive continuous improvement and success.

DAY 4: TRANSFORMATIVE 90-DAY IMPACT MEASUREMENT

Leaders celebrate the measured differences made over 90 days in a face-to-face facilitated workshop. During this workshop, leaders revisit and enhance core ThinkOn® thinking skills, apply solution-focused strategies to tackle new and pressing issues, plus plan the next key priority 90-day challenges. This workshop ensures leaders achieve measurable outcomes and embed lasting, sustainable change in their leadership capabilities.



THE THINKON® RESULTS FRAMEWORK

LEADERSHIP CAPABILITY

Programme Evaluation Cohort 1

The following evaluation questions are crafted to understand the effectiveness and impact of our leadership development 90-day Thinking Bigger Better Bolder® programme. Scored on day 1 and day 90, these evaluation questions are designed to provide valuable insights into participants' leadership capabilities, assessing both the new skills acquired and the transformative mindset gained from applying ThinkOn® tools and techniques, both individually and collaboratively.

These scores showcase significant gains in leadership capabilities, demonstrating heightened improvements in thinking effectiveness problem-solving and supporting others in achieving goals and finding solutions.

PROGRAMME EVALUATION QUESTIONS (SCORED ON A 1-10 SCALE)	% INCREASE OVER 90 DAYS
Q1. Ability to help yourself and others think effectively	44%
Q2. Ability to craft high-quality questions to help self and others with their thinking	60%
Q3. Confidence to develop and challenge others through effective questioning	62%
Q4. Confidence in defining goals for self and others	47%
Q5. Ability to turn problems into solutions (possibility thinking)	53%
Q6. Confidence in ability to help others find solutions	56%
Q7. Confidence in diagnosing/identifying key issues	40%
Q8. Ability to help others take personal responsibility for next steps/actions	53%
Q9. Ability to develop an action plan	51%
Q10. Ability to think creatively	52%

LEADERSHIP CAPABILITY

Programme Evaluation Cohort 2

PROGRAMME EVALUATION QUESTIONS (SCORED ON A 1-10 SCALE)	% INCREASE OVER 90 DAYS
Q1. Ability to help yourself and others think effectively	40%
Q2. Ability to craft high quality questions to help self and others with their thinking	58%
Q3. Confidence to develop and challenge others through effective questioning	42%
Q4. Confidence in defining goals for self and others	30%
Q5. Ability to turn problems into solutions (possibility thinking)	29%
Q6. Confidence in ability to help others find solutions	31%
Q7. Confidence in diagnosing/identifying key issues	31%
Q8. Ability to help others take personal responsibility for next steps/actions	23%
Q9. Ability to develop an action plan	27%
Q10. Ability to think creatively	29%

HIGHLIGHTED KEY IMPROVEMENTS

UROLOGY BOTOX CLINIC EFFICIENCY IMPROVEMENTS

Revolutionised clinic operations, resulting in an extra 50 appointments annually.

INCREASED APPOINTMENT CAPACITY BY 50 EXTRA APPOINTMENTS ANNUALLY:
Jo's initiative has created room for 50 more appointments per year, directly addressing patient wait times and improving clinic flows.

IMPROVED PUNCTUALITY AND PATIENT FLOW:
Jo's adjustments have ensured that the team starts on time, significantly reducing patient wait times. This enhancement has streamlined patient flow through the clinic, contributing to a more efficient service delivery.

CULTURE OF OPEN COMMUNICATION:
By fostering a culture of open communication and collaboration, Jo secured team buy-in for new rota patterns. This has led to smoother operations and more productive discussions when addressing challenges, further enhancing team morale and performance.

TIME-SAVING MEASURES:
The introduction of a dedicated proforma has streamlined administrative processes, allowing the clinic to serve an additional 12 patients per year by saving 5 minutes per appointment. This is an ongoing improvement effort, showing promising initial results.

Overall, Jo Butler's strategic changes have fostered a solution-focused environment within the team. These efforts have contributed to measurable improvements in clinic efficiency and patient satisfaction, showcasing the significant impact of well-implemented operational changes in a clinical setting.

MAINTAINING STANDARDISED RESUSCITATION TROLLEY INSPECTIONS IN THE EMERGENCY DEPARTMENT

100% Compliance Saves a Life

GOAL:
Jessica's goal: To secure 100% compliance in resuscitation trolley checks across key areas of the emergency department (ED), ensuring that all necessary equipment is available and ready for use during critical moments.

MEASURABLE RESULTS:

- **Improved Response to Collapses:** With full compliance, staff have immediate access to life-saving equipment, reducing stress and ensuring swift intervention during patient collapses, regardless of location within the ED.
- **Lives Saved**: 1 life has already been saved due to the 100% compliance rate in the trolley checklist within the waiting room. A patient collapsed outside the ED, and the fully stocked resuscitation trolley was used to successfully regain spontaneous circulation.
- **Increased Accountability**: The team has embraced a heightened sense of personal responsibility, leading to a stronger commitment to patient safety and readiness.

PROCESS AND APPROACH:
Jessica fully embraced the methodology from the outset, recognising the importance of ensuring that resuscitation trolleys were always checked and stocked, particularly in such a high-pressure environment. As a key leader in the ED, she faced the challenge of inconsistent checks due to staff shortages and the department's busy nature.

To address this, Jessica employed “possibility thinking techniques" to brainstorm strategies for securing buy-in from her team. She focused on creating a strong, relatable rationale for consistent checks, thus ensuring that, in the event of a patient collapse, staff could be confident that all necessary equipment would be available, reducing pressures and enabling both basic and advanced life-saving procedures.

Through open communication and by gaining the trust of her team, Jessica successfully fostered a culture of responsibility. Staff now recognise the critical importance of these checks and their direct impact on patient outcomes. By maintaining this level of diligence, ED is better prepared to handle emergencies in all areas, regardless of staff availability or patient volume.

GOAL:
Zoe’s goal: To increase compliance with admission documentation in the Intermediate Acute Unit (IAU) ward, ensuring patient records were completed accurately and efficiently.

MEASURABLE RESULTS:

- **Compliance Improvement:** Documentation compliance rose from 18% to 82% within 90-days.
- **Enhanced Confidence:** Zoe's confidence grew steadily, with major progress by the midpoint and success cemented by day 90.
- **Positive Momentum:** Motivated by this success, Zoe now seeks to improve care plan documentation across the ward.

PROCESS AND APPROACH:
Zoe developed a strategic plan crafting high-quality questions, involving key stakeholders to meet objectives. Leveraging ThinkOn®tools, she transformed documentation processes and improved patient care through careful planning and teamwork. This experience highlighted the value of goal-setting and collaboration.

SUSTAINED PROGRESS:
Zoe's success has inspired her to focus on improving care plan documentation, using the same coaching techniques and strategies.

INCLUSIVE INFORMATION:
The leap in compliance from 18% to 82% demonstrates Zoe’s commitment to better patient care through accurate records, reducing errors and improving continuity of care.

PERSONAL DEVELOPMENT:
Zoe, as a parent of an autistic child, realised that the strategies she applied at work also helped manage challenges at home, reinforcing her belief in the methodologies used.

IMPROVING THE COMPLIANCE IN PATIENT RECORDS MANAGEMENT

64% increase in Admission Documentation Compliance in 90 days

ENHANCING SAFETY AND EFFICIENCY IN A&E DISCHARGE AND TRANSFER PROCESSES

30% Fewer Incidents

GOAL:
Adetomilola's primary goal is to design and implement an A&E discharge and transfer checklist to reduce discharge and transfer-related incidents, ensuring safer transitions from A&E, ultimately contributing to better patient outcomes.

MEASURABLE RESULTS:

- **Reduction in Incidents:** 30% decrease in discharge and transfer-related incidents, proving the checklist's effectiveness in enhancing patient transfer safety.
- **Shorter Length of Stays:** The initiative reduced patient stays in A&E, enabling quicker, safer transitions and improving patient flow.
- **Improved Staff Competency:** Staff training, paired with the checklist, has boosted knowledge, communication, and best practice adherence, ensuring patient safety

PROCESS AND APPROACH:
Focusing on enhancing the effectiveness of high-quality questioning and utilising the ThinkOn® Results Framework to uncover the 'what' and 'how' of improvements within A&E discharge and transfer processes. The aim is to pinpoint critical areas where breakdowns occur and devise actionable solutions to resolve them

Recognising the importance of involving others for buy-in and for influence. Engaging colleagues and line managers ensured that the checklist is seen as a team-driven improvement. This will help ensure smooth adoption and consistent use, as team members take ownership of the new process.

SUSTAINED PROGRESS:
Goals have been set to sustain progress, such as the implementation of regular training sessions, ensuring all staff, including new recruits, are proficient in its use. These sessions will be aligned with the monitoring of key performance indicators, such as incident rates, length of stays, and patient feedback, allowing for continuous assessment and ongoing refinement of the checklist.

GOAL:

Nikki's goal was to improve the process of referring patients with wounds to the Tissue Viability Nurses (TVN) by streamlining the photo upload process, ensuring faster and more successful referrals.

MEASURABLE RESULTS:

- **Dramatic Time Reduction:** Nikki reduced the time to upload photographs for referral from up to 2-hours to just 5-minutes, vastly improving speed and efficiency.
- **Increased Referral Success:** TVNs now receive wound photos promptly, reducing delays and improving patient care.
- **Removing Unnecessary Pressures** : Nikki's initiative has alleviated pressure on the nursing team, freeing up valuable time and reducing stress levels on the ward.

Process and Approach: Nikki maximised the 10 possibility thinking questions to analyse challenges within the referral process. Previously, the process took up to 2-hours, causing delayed assessments and rejected referrals.

Nikki's approach highlights the value of collaboration. By engaging others and leveraging resources, she transformed a frustrating bottleneck into a smooth, efficient workflow, freeing up nursing time to focus on patient care.

SUSTAINED PROGRESS:

Nikki's success has set a new standard for how referrals to the TVN team are handled. The improvements she introduced continue to benefit both nursing staff and patients, fostering a less pressured, more efficient environment.

INCLUSIVE INFORMATION:

The old referral system created unnecessary delays, with wound photographs taking up to 2-hours to upload. Nikki's intervention reduced the upload time to just 5- minutes, allowing faster TVN team assessments, positively impacting patient care and nursing efficiencies.

ENHANCING EFFICIENCIES IN TISSUE VIABILITY NURSE REFERRALS

Processes reduced from 2 hours to just 5-minutes, boosting speed and efficiencies.

OPTIMISING OXYGEN ADMINISTRATION: ENHANCING PATIENT CARE THROUGH TARGETED STAFF TRAINING

40 ED Staff Trained: Cutting Oxygen Waste and Enhancing Patient Care.

GOAL:

Laura's goal is to ensure that oxygen is administered correctly (nasal, Venturi, high flow, or non-rebreather masks) to enhance the quality of patient care. The aim to educate at least 40 Emergency Department (ED) staff members on proper oxygen administration techniques, as evidenced by their successful sign-off on a competency register.

MEASURED RESULTS:

- **Effective Staff Training**: Laura has successfully trained a minimum of 40 ED staff members.
- **Enhanced Visual Aids:** To support ongoing learning and adherence, Laura has created 'how-to' posters and information cards for lanyards and badge holders, making essential information readily accessible to staff in real-time.
- **Reduction in Oxygen Waste**: The implementation of the new training and tools has led to a reduction in oxygen waste, contributing to longer stock levels and reduced associated costs. This has not only improved the efficiency of oxygen use but also resulted in cost savings for the department.

PROCESS AND APPROACH:

Laura utilised the ThinkOn® Results Framework to diagnose key issues, obstacles, and barriers within the team, converting problems into questions to spark new ideas. This understanding informed the development of training sessions for ED staff, concentrating on the correct administration of oxygen through various delivery methods. The training was further supported by the creation of visual aids, including instructional posters and portable information cards, to reinforce learning and ensure consistent practice.

By addressing the need for proper oxygen administration, Laura has made a significant difference to inpatient care quality. The reduction in oxygen waste and costs further highlights the effectiveness of her initiative, demonstrating the value of well-informed staff in maintaining both clinical standards and resource efficiency.

GOAL:
Sam's goal: To have fully implemented an organised system that ensures patients on the W42 TCI list are admitted in a timely manner. This system will enhance the patient journey and experience, as measured by the collection and analysis of evidence related to listed dates and admission times.

MEASURABLE RESULTS:

- **Shorter Waiting Times**: The new system has reduced elective patient waiting times, ensuring quicker admissions and fewer delays, improving the overall patient experience.
- **Enhanced Bed Flow:** Bed transfers and flow have accelerated, preventing bottlenecks and ensuring beds are available promptly.
- **Cost Savings:** Fewer bed-blocking incidents have significantly lowered costs related to delayed discharges, freeing up resources for patient care.
- **Better Patient Communication:** Improved communication now offers patients clearer admission dates and timelines, reducing anxiety and enhancing the patient journey.

PROCESS AND APPROACH:
The approach centred around analysing current bottlenecks and inefficiencies in the W42 TCI admission process. Using high-quality questions (focused and opening the mind questioning) and stakeholder influence and buy-in, a pathway was designed to streamline the transition from being listed for admission to actual bed placement.

Collaboration was key to the success of this project. Engaging with key team members, including bed managers, administrative staff, and clinical leaders, allowed the creation of a collective vision for the new system which ensured the 'ways of working' addressed the specific needs of the ward, making it more effective and sustainable.

SUSTAINED PROGRESS:
Reduced waiting times and bed blocking have improved patient care and staff efficiency. Regular audits will ensure continued low waiting times and peak system performance. New staff will receive training, and ongoing feedback will help refine the process.

INCLUSIVE INFORMATION:
Previously, patients on the W42 TCI list experienced long waits and poor bed management, leading to confusion, extended stays, and higher costs, negatively affecting the patient experience.

STREAMLINING ELECTIVE ADMISSIONS AND IMPROVING PATIENT JOURNEYS ON W42

Reducing Bed Wait Times by 57%

INTERVENTION:
Rachel and Callula from the colorectal 2-week wait team developed a new pathway allowing patients with potential irritable bowel disease to be directly referred to the gastroenterology team.

DIAGNOSIS:
51 patients received an actual diagnosis, with colitis being the most common condition identified.

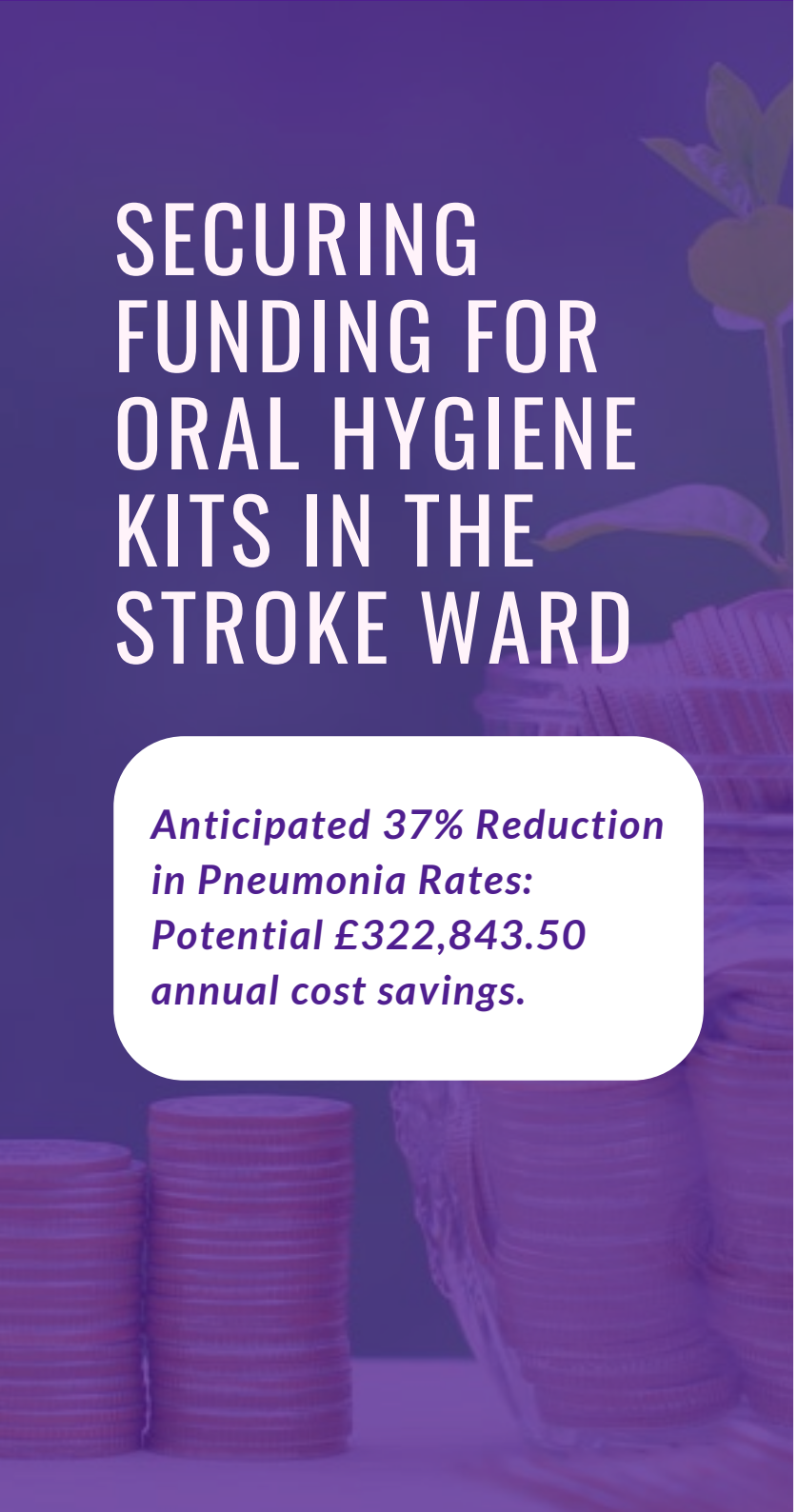
MEASURED RESULTS:
COST SAVINGS:
The new referral method resulted in a £40,000 saving over six months for 58 patients, reflecting a significant reduction in unnecessary healthcare costs.

WAIT TIME REDUCED TO 8 WEEKS:
40 out of 58 patients were seen within 8 weeks, This streamlined referral process has significantly enhanced patient experience by reducing wait times and providing timely diagnoses, while also achieving cost savings.

GASTROENTEROLOGY REFERRAL PATHWAY IMPROVEMENT

Realising £40,000 in cost savings by eliminating unnecessary healthcare expenditures, positively impacting the care of 58 patients.

SECURING FUNDING FOR ORAL HYGIENE KITS IN THE STROKE WARD



Anticipated 37% Reduction in Pneumonia Rates: Potential £322,843.50 annual cost savings.

GOAL:
To secure funding from the quality board for purchasing oral hygiene kits for the stroke ward, Georgie defined the following criteria:

MEASURABLE RESULTS:
REDUCTION IN PNEUMONIA:
Introducing oral hygiene kits will decrease pneumonia cases in stroke patients by 37%.

DECREASED MORTALITY RISK:
The risk of patient mortality will be three times less likely.

ANNUAL COST SAVINGS:
Implementation will lead to savings of **£269,000 per year,** even after accounting for equipment costs.

ENHANCED STARS PERFORMANCE:
The initiative will result in improved STARS performance metrics.

PROCESS AND APPROACH:
Leveraged high-quality questions and coaching cards during the learning process, which provided significant value. Utilised the Results Framework to develop a robust plan and proactively engaged stakeholders. A key part of the planning process involved securing buy-in for the funding. To support her meeting with the quality board, Georgie had prepared a series of high-quality questions to facilitate discussion and funding approval.

INCLUSIVE INFORMATION:
From February 2023 to January 2024, 150 patients were diagnosed with pneumonia at SHH stroke unit, costing the Trust an estimated £872,550.
The estimated cost savings, based on a predicted 37% reduction in pneumonia rates, would amount to £322,843.50 per year. Adjusting for the upfront equipment costs, the predicted annual savings for the Trust would be £269,097.90.

Kathryn has successfully introduced a Comprehensive Geriatric Assessment (CGA) into patient notes, achieving significant improvements in patient care and safety through staff engagement and thorough implementation.

ENHANCED ASSESSMENT COMPLETION-KEY ACHIEVEMENTS:

Full Assessment: Improved by 150%
CPR Discussion: Improved by 125%
AMT (Abbreviated Mental Test) Score: Improved by 30%
Appetite & Swallow Evaluation: Improved by 900% (from 0 to an average of 9).

These improvements have collectively resulted in enhanced patient safety and care quality.

STAFF ENGAGEMENT AND BUY-IN:

Kathryn successfully secured the commitment of nursing staff to complete the CGA, ensuring consistent and comprehensive patient assessments.

Overall, Kathryn Munir's initiative has led to substantial improvements in patient assessment processes, significantly enhancing patient safety and care quality within the geriatric unit.

COMPREHENSIVE GERIATRIC ASSESSMENT IMPLEMENTATION

Exceeding expectations across all CGA assessment metrics.

MOBILITY AWARENESS INITIATIVE- RISE & SHINE

Audit reveals a remarkable 50% uplift in Patient Mobility.

Johanna has led the "Rise & Shine" initiative to enhance mobility awareness on wards M6, M4, and B3. This effort aims to reduce bed stays for neck of femur (hip fracture) patients, with significant initial improvements observed.

IMPROVED PATIENT MOBILITY – KEY ACHIEVEMENTS

MOBILITY AT BREAKFAST:

First audit shows a 50% improvement in patients being up and out of bed at breakfast.

REDUCED BED STAY GOALS:

Current Bed Stay: 26 days for neck of femur patients.
Target Bed Stay: 90-day improvement cycle to reduce to 14 days.

PROBLEM-SOLVING REALISATIONS:

Communication: Identified a need for clearer communication in patient notes.

Responsibility Clarity: Determined the necessity for clarity on who is responsible for patient mobilisation.

TRAINING NEEDS:

Recognised the requirement for additional training in mobilisation techniques.

Johanna "Rise & Shine" initiative has already made significant developments in improving patient mobility, with a clear plan to address communication, responsibility, and training issues to further enhance patient outcomes.

BACKGROUND

Recent reviews completed by NHS England, Daniel (Trust ACP lead) and the completion of the NHS 'Advanced Practice Maturity Matrix' highlighted that there are areas of governance around supervision, competency and job frameworks that were lacking across the trust. Being involved in national ACP meetings, Danny had identified a suitable product that would provide a significant structure to progress resolving the identified problem areas.

INTERVENTION

Danny utilised the Umbrella thinking and the 'possibility thinking' concepts and identified involving significant others to achieve the procurement goal. A coalition with Tameside Hospital was created and following 1:1 coaching meetings Danny was able to get verbal and written agreement to progress the procurement of the NES e-portfolio from Nicola Firth (Chief Nurse).

PROBLEM-SOLVING REALISATIONS

Involving Others – utilising the 'possibility thinking' model and the '20 answers technique' encouraged Danny to think of a wider range of people to involve who could help him gain backing for the procurement.

Coaching – sessions plus the use of 'ThinkOn' s' leadership and productivity app, helped Danny prepare for the high-level meetings and ensured key priorities, discussion points and potential challenges were already considered.

PROJECTED RETURN ON INVESTMENT

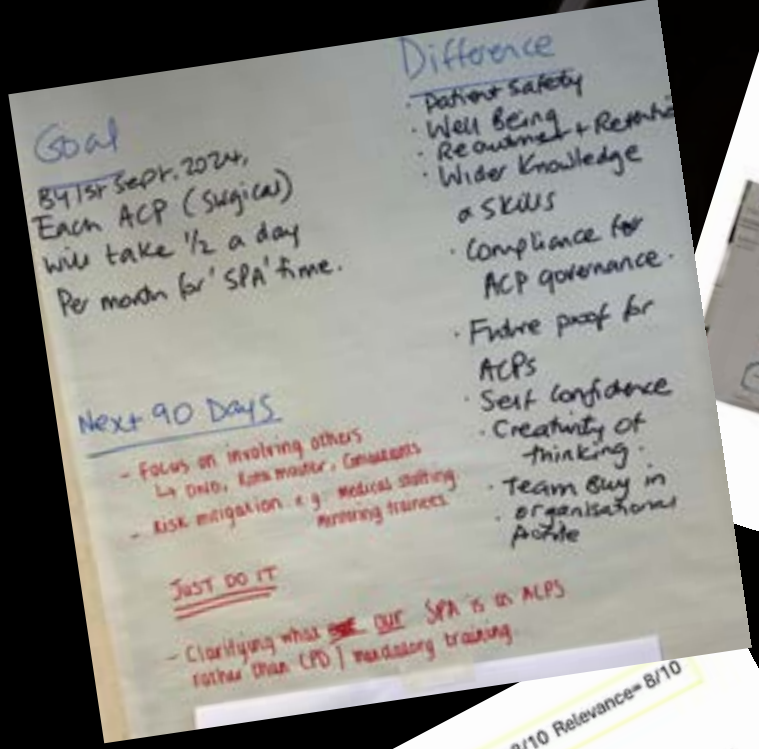
ROI from an Advanced Clinician Practitioner (ACP) e-Portfolio system embedded within the trust will significantly reduce costs by improving administrative efficiency, optimising training and development, enhancing clinician retention and productivity, bettering patient care, and enabling effective resource allocation. These improvements contribute to a more cost-effective and efficient healthcare delivery system, aligning with strategic organisational goals and ultimately enhancing professional development.

THE FUTURE

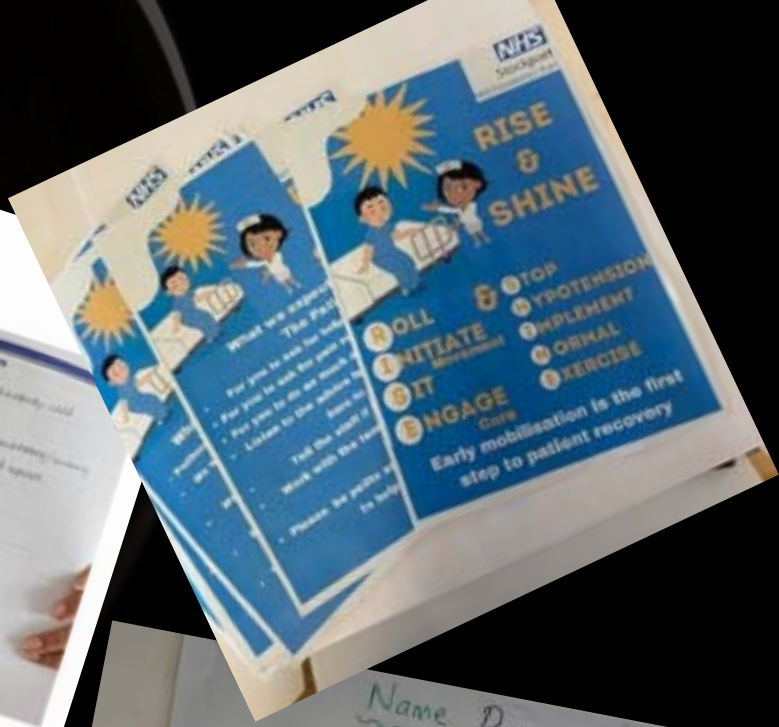
The realisation that goal setting techniques need to be applied to all current and future projects to harness the benefits of the training completed. Danny is excited to be able to utilise the 'ThinkOn' coaching routeway, tools and techniques to support ACPs across the trust as they continue research, teaching and quality improvement programmes in the future.

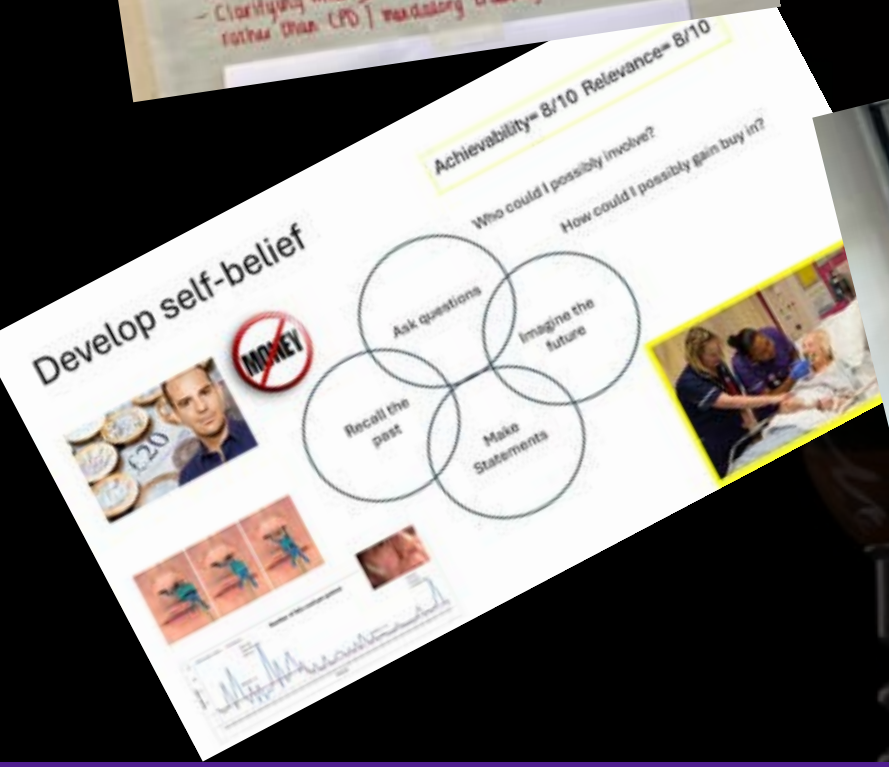
TRUST ADVANCED PRACTITIONER E-PORTFOLIO® PROCUREMENT

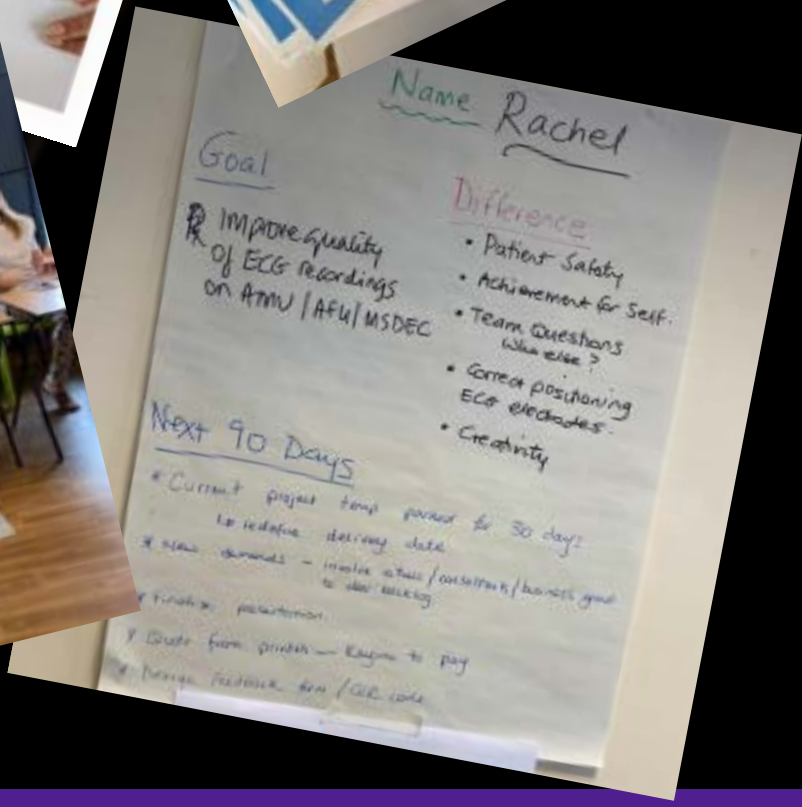
ACP e-Portfolio System maximises the efficiency and effectiveness of future strategic organisational objectives.


Goal
Difference
Next 90 Days
Just do it

Explore possibilities and plan priorities


RISE & SHINE
Early mobilisation is the first step to patient recovery


Develop self-belief
Achievability= 8/10 Relevance= 8/10
Who could I possibly involve?
How could I possibly gain buy in?
Ask questions
Imagine the future
Recall the past
Make Statements
MONEY


Name Rachel
Goal
Difference
Next 90 Days

LIGHT BULB MOMENTS

Dividing large goals into smaller, easily achievable tasks has boosted my confidence.

Get clarity of the 'what's' before jumping into the 'how's'.

Celebrate the small wins.

When learning something new, I now ask the question 'Who else has faced a similar challenge or experience that I could possibly involve?'

Getting others to imagine the future, quickly gets others bought in.

I now have a framework to use when solving problems and achieving goals.

I now realise that when I craft a great question it helps me engage with the team.

What could I possibly say, ask, recall or imagine that might be more helpful than any hindering thoughts?

Recognising my own or others hindering thoughts is a good thing.

Starting with 'reasons to involve others' and 'who to possibly involve' questions, makes my job easier.

Asking the right question to the right person can help me accelerate my goals.

When faced with a problem, I now reframe it as a question, instantly clearing my hindering thoughts.

LIGHT BULB MOMENTS

Thinking differently is fun and energising!

Change doesn't worry me anymore; I now see it as an opportunity to grow my skills and knowledge.

Using coaching cards helps me discover the right questions to ask.

Success comes more easily when I invest time in finding the right question to address.

Involving others helps me achieve my goals faster and more effectively.

By asking the right questions, I can have more productive conversations with my line manager.

Asking open-ended questions encourages my colleagues to generate creative ideas.

Understanding how others think allows me to gain quicker buy-in from the team.

Realising the potential of a 90-day goal plan, I'm amazed at how much I can accomplish.

Breaking large goals into manageable chunks has boosted my confidence – they're no longer overwhelming!

Turning a problem into a question sparks fresh ideas and solutions.

Asking the right question to the right person can help me accelerate my goals.

Hearing positive feedback from my achievements has skyrocketed my confidence – I'm excited for what's next.

Choose an impact and we will donate it on your behalf

In partnership with B1G1 BUSINESS FOR GOOD

GO MAKE A DIFFERENCE

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