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Reflections on being and becoming a person-centred facilitator

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Abstract

Background: Facilitation is vital for effective practice development and is viewed as an holistic means of enabling practitioner emancipation, development of self and effective workplace cultures. Person-centredness is a core value enacted in effective workplace cultures and focuses on enabling personhood, or the 'coming into own' and flourishing of self and others. Combining the concept of facilitation with person-centredness implies developing connected relationships in which both facilitator and those facilitated feel acknowledged and respected as persons who are able to develop and grow. This in turn implies that the facilitator is also in a constant state of being and becoming, which can be supported and guided by principles for action.

Aims and objectives: The aim of this paper is to present principles for person-centred facilitation derived from a critical and creative reflective inquiry into the authors' experiences of facilitating participatory action research. The four key principles for developing and sustaining person-centred facilitation are illustrated in this paper using a conversational narrative.

Conclusion: Individuals and relationships are continuously subjected to constant intrapersonal, interpersonal and contextual influences, so being a person-centred facilitator in everyday healthcare practice is no mean feat. It is proposed that the four principles – being other-centred without losing self, valuing a constant state of becoming, maintaining relational connectedness and consciously working with context and cultures – help sustain balance in self and relational reciprocity while facilitating practice development in a person-centred way.

Relevance to practice development: Reflection in action using the four principles can support personcentred facilitation of practice development. Those supporting (novice) facilitators may also find the principles useful in formulating critical questions to guide reflection on action.

Keywords: Person-centredness, facilitation relationships, leadership relationships, workplace culture, action research, support systems

Introduction

Person-centred care has gained increasing attention in healthcare practices since the turn of the millennium and has led to the development of frameworks such as McCormack and McCance's (2010) framework for person-centred nursing. Tom Kitwood's consideration of personhood while caring for people living with dementia defines personhood as 'a standing or status that is bestowed upon one human being, by others, in the context of relationship and social being' (Kitwood, 1997, p 8). Person-centeredness is also a relational concept and Carl Roger's definition of person-centredness expands the goal beyond acknowledging personhood to include growth:

'A philosophy, an approach to life, a way of being, which fits any situation in which growth – of a person, group or community – is part of the goal' (Rogers, 1980, p xvii).

While person-centeredness is often associated with care relationships, Roger's definition shows that it can characterise any helping relationship aimed at growth. In the context of practice development, Shaw et al. (2008) linked person-centeredness with facilitation to describe the enablement of growth and self-actualisation of others and self. Although Shaw et al.'s (2008) concept analysis of enablement is useful, our personal lived experiences as practice developers and action researchers have taught us that being and becoming a person-centred facilitator is no easy task. In this paper we present four principles for facilitators who are part of the supportive organisational system found in the contextual domain of McCormack and McCance's (2010) framework:

- Being other-centred without losing self
- Valuing a constant state of becoming
- Maintaining relational connectedness
- Consciously working with context and cultures

The principles were derived from a critical and creative reflective inquiry (Cardiff, 2012) of our experiences and are formulated as fundamental beliefs that guide and/or actuate one's agency, rather than dictate it. They focus on 'being and becoming' a facilitator rather than 'doing' facilitation, which safeguards space for the facilitator's personal growth, flexibility and risk-taking in practice development. They are illustrated in a conversational narrative derived from our inquiry, but we start by introducing our work followed by our view of person-centred facilitation.

Facilitating practice development through action research

Our first major encounter with emancipatory facilitation came when conducting doctoral participatory action research studies. Inherent to this methodology is the emancipatory intent of enabling participants to transform those aspects of their social context they deem unjust and/or detrimental to the flourishing of self and others. Transformative learning and action are simultaneously facilitated and researched. In contrast with more traditional research methodologies, an action researcher becomes engaged, working collaboratively with participants during the change process and encouraging participation in the research process. Facilitation is therefore an intentional, skilled act aimed at enabling the transformation of individual, group and contextual being, but not explicitly aimed at facilitator growth. However, our lived experiences as facilitators of participatory action research, exploring person-centeredness in leadership and workplace culture, enlightened us to the importance of facilitator growth. The methodology then becomes closely related to emancipatory practice development, which aims to foster flourishing of all within a context. Due to the nature of our studies, our lived experiences formed a central role in our understanding of person-centred facilitation.

I (the first author) conducted participatory action research aimed at developing an effective workplace culture within a Dutch clinical setting (van Lieshout, 2013). However, after two years it became evident that my facilitation approach was not effective in moving the practitioner teams into action. This created an opportunity to engage in a hermeneutic analysis of my personal facilitation narrative and resulted in a mid-range theory of essential conditions for facilitating participatory action research. This theory states that there is a constant interplay between facilitator and context dynamic, whereby the facilitator needs to focus both on self and others within the context if the synchronicity needed for effective change is to be achieved.

I (the second author) conducted participatory action research exploring and developing personcentred leadership in a Dutch clinical setting (Cardiff, 2014). Data were gathered from clinical leaders as well as from my own leadership of the study. Analysis resulted in a framework for person-centred leadership, which shows that what happens within the context influences leadership relationships, and vice versa. A person-centred leader aims primarily to enhance an associate's (follower's) 'coming into own' through relational connectedness. The feeling of connectedness between leader and associate emerges through the relationship rather than the transactions. It is this primary focus of enabling 'coming into own' (self-actualisation, empowerment and wellbeing) that differentiates person-centred leadership from other leadership styles and supports a comparison with facilitation.

Person-centred facilitation

We define person-centred facilitation as the creation of relational connectedness through which others and self can be enabled to come into own. While many definitions of facilitation abound, simply defined it is the helping of others to change their current situation. However, this implies a unidirectional flow of support and change. Once we start to combine being person-centred with facilitation, a specific type of relationship emerges where connectedness and reciprocity foster mutual growth. Descriptions of person-centeredness tend to place great emphasis on other-centredness, for instance, trying to understand the whole person in context, working with their values and beliefs (McCormack and McCance, 2010), treat them as an equal partner, be compassionate and caring (Cardiff, 2014), attentive (Klaver and Baart, 2011) and showing sympathetic presence (McCormack and McCance, 2010), as well as respecting the others right to self-determination (Slater, 2006). While the importance of othercentredness is recognised, Shaw et al. (2008) also state that an enabling type of facilitation should result in growth and development of both other and self. This is not surprising if we view facilitation from an existential humanistic paradigm, which states that people exist and flourish in connection with others. However, it may be the case, and is certainly our experience, that those new to person-centred facilitation may overlook and/or underestimate the importance of knowing self in order to build reciprocal relationships, even though this is a documented attribute of person-centred practitioners (McCormack and McCance, 2010). Looking at facilitation from a critical paradigm means that we also need to consider the influence of context on relationships. For instance, organisational changes or hierarchical cultures may deflect focus away from, and/or discourage, interpersonal attentiveness. We therefore propose that a knowledge of self in context, achieved through consistent reflection on one's own being, doing and becoming as a facilitator, helps sustain relational connectedness and the reciprocity characteristic of person-centred relationships.

People may know themselves, their being, doing, values and beliefs within a facilitation relationship and context, but these are in a constant state of becoming, continuously subjected to intrapersonal, interpersonal and contextual influences (Heron, 1999). The facilitator is usually the first to focus on developing relational connectedness, aware that this fosters growth. Consistent reflection on how they are enabling growth of the other may initially be sufficient to validate the significance of their own being. However, if they fail to act adequately and/or the person being facilitated fails to acknowledge the facilitator's value, the risk of disengagement increases because reciprocity is not sustained.

Principles for sustaining person-centred facilitation

Having accompanied each other through our PhD studies, we had long suspected that blending our experiences would be a useful exercise. Post-PhD we engaged in a critical and creative reflective inquiry to find an answer to the question: 'What is needed to facilitate others in a person-centred way?' The inquiry moved through phases of sharing our personal narratives of facilitating participatory action research, to reflecting on the experience using our inquiry question and creative expression, before critically dialoguing findings and conclusions (see Table 1). The inquiry resulted in the four principles for sustaining person-centred facilitation. We have chosen to introduce each principle as a guide for action, followed by a conversational narrative using the content of phases two and three of the critical and creative reflective inquiry. In doing so, we acknowledge the influence our separate contexts had on our conclusions, and preserve space for the reader to explore the principles from their own frame of reference. At this point we would also like to make clear that we see these principles as interwoven during person-centred practice.

	Descriptive: Phase 1		ve inquiry (Cardiff, 2012 Reflective: Phase 2	.,	Critical/emancipatory: Phase 3
Process	'Surfacing' a detailed personal account of an event or experience	•	 Creative expression of individual interpretations of the story heard <i>and/or</i> Collective reflection on the meanings embedded within the narrative 		 Critique of current practice Identification of the desired practice and how to achieve it
Levels of reflection	Reflectivity Affective reflectivity		 Discriminant reflectivity Judgemental reflectivity 		 Conceptual reflectivity Psychic reflectivity Theoretical reflectivity

Principle 1: Being other-centred without losing self

While being other-centred could be construed as being person-centred, as it fosters knowing and engaging with the other, the additional attributes, processes and concepts of knowing self, mutuality and reciprocity are needed for person-centred relationships.

Shaun: 'So what do we mean when we say "not losing sight of self when facilitating others"?'

Famke: 'That we can forget that we also have a right to self-determination and growth as a facilitator. It is better to be authentic in your role rather than play a part expected by yourself and/ or others. For instance, when I entered the research setting, my initial plan was to spend time becoming accustomed to the people and context before collaboratively deciding on strategies for participation. However, the leaders, and management in particular, expected an expert facilitator with a detailed action plan on how to achieve their goals. This placed pressure on me and, wanting to meet their expectations, I felt a need to stay one step ahead of them all the time. My focus became helping others achieve their goals. There was a constantly changing and reorganising context with no management support in creating conditions for participative and collaborative (action) planning. The diverse range of stakeholder needs was not necessarily aligned to my original research question. Consequently, I became caught up in these competing needs, which deflected me from reflecting on what I felt my role should be, my position within the organisation and what I needed to achieve the research goals in a way that was congruent with the research methodology.

'As issues in the workplace increased and became more complex, I found myself increasingly sucked into and sharing their feelings of hopelessness. I suppose the paradox here was that in trying to interpret the situation from an other-centredness stance, I only hindered my own growth as a facilitator and so was less effective in helping them reach their organisational needs and goals. Person-centeredness is about being other-centred without losing self, finding balance between doing and being in relation with others and context. For you this was less of an issue, wasn't it?'

Shaun: 'I wanted to start my study on an equal footing, so I advertised the research proposal in our university journal. The participant leaders consciously chose to answer the invite and then we negotiated how to work together. Moreover, I was both participant and researcher, so I too reflected on what it meant to be person-centred and systematically gathered evaluative data of my own being and doing. We all experienced how reflecting on our being influenced our becoming as person-centred leaders. Even so, there were moments when I/we felt that our own being and needs were subordinated to those of others. For instance, in the beginning there were pressing issues about workload and even though this was not a concept directly aligned to the research questions or goals, I decided to work with the leaders to tackle the issue. This balancing of needs fostered relational connectedness. Later when I noticed the leaders becoming less active, as everyday pressures diverted them away from the research, it was easier to share my concerns and we found a modus whereby their degree of participation enabled them to continue grow as leaders, and for the study to grow in terms of actions and data gathering.

'As a participant leader once formulated: "Whilst being caring and person-centred entails showing sympathetic presence, we also need to be prepared to sometimes leave problems where they belong, rather than take ownership of them". In other words, we need consciously to move through different levels of engagement and so create time and space for all to reflect on their being and becoming in situations and relationships.'

Principle 2: Valuing a constant state of becoming

Valuing a constant state of becoming is congruent with person-centeredness, with its roots in existential humanism and critical social science. The assumption here is that people in relation create social structures, conventions and practices which in turn influence their being (in relation). Consequently, subjected to this constant influencing, individuals, relationships and context are in a constant state of becoming.

Famke: 'Can you describe how you worked with the assumption that individuals, groups and contexts are in a constant state of becoming?'

Shaun: 'There were moments when I observed myself, participants and/or the social context in disequilibrium and I consciously intervened to help move them forward into a new state of being. This was often only possible because I could pull from years of teaching and facilitation experience. For instance, listening to one charge nurse's narratives, I often heard her express sympathy and compassion towards staff. However, I also heard staff describing her as distant and shatterproof. When a conflict arose between the charge nurse and a staff nurse, in which she felt her sympathetic presencing and compassion was not being reciprocated, I invited her to reflect on her actions. She discovered how her values and beliefs were negatively affecting her own need for recognition and relational reciprocity, which helped her move on and become the leader she and others valued. However, there were also moments when this constant state of becoming was frustrating, when I felt we took one step forward then two steps back.

'One example was when, after introducing the physician manager to the term 'person-centred care', we noticed him using it more often. However, while we moved on to explore person-centeredness within other relationships, he failed to transfer the principle and continued to maintain a hierarchical, non-person-centred stance with (nursing) staff.

'Another example was when participant leaders continued to delay starting to facilitate storytelling sessions with staff, and decline my invitations for them to facilitate our sessions, which were intended to help build their confidence in facilitation. In hindsight, if I had been more conscious of things being in a constant state of becoming, I may have been more patient, an attribute that later emerged in the person-centred leadership framework.

'Balancing the constant state of becoming of self, others and context was a core theme in your study, wasn't it?'

Famke: 'Losing patience is something I experienced too. I imposed high expectations on myself, expecting that I should be able to operate as an expert facilitator instead of accepting that I was a novice becoming more expert. Not accepting my current level of expertise contributed to losing self, as I've just described.

'A similar thing to your experience with the charge nurses happened to me when I asked the charge nurse to co-facilitate activities with me. My assumption was that, as a leader, she possessed the necessary skills to facilitate and I had difficulty accepting her constant refusals to facilitate with me. Later it became obvious that she didn't possess these skills, but she also refused my offers to help her develop them. I became frustrated as I was dependant on her for access to the teams. Higher management offered to force her to collaborate, but this was not congruent with my beliefs about person-centeredness. The already fragile relationship only worsened and as neither I nor anyone else saw any way of repairing it, I choose to focus on working with the team members.

'That the context was constantly changing was no surprise for me, but working with this dynamic was a different story, and often frustrating. For instance, after planning and preparing activities I was often confronted with participants who did not turn up because other activities had been planned and/or different participants arrived than expected, such as higher management. To work with such dynamics requires a great deal of flexibility and a repertoire of tools and skills that I, as a novice, was still developing. Plus, I ambitiously and consistently developed activities that were founded on principles of emancipatory practice development. In hindsight, these often outpaced where people and contexts were in their emancipatory development. What I did learn from this experience was that working with people, internally and externally, of different facilitation expertise eases the assessment and acceptance of participant current state of development, and find ways of working with them effectively. I learned the importance of working in the here and now and not just being focused on the future. This makes it easier to see, feel, name and celebrate achievements, however small.'

Principle 3: Maintaining relational connectedness

While persons can feel connected to something bigger than themselves, person-centred relationships also enable feeling acknowledged and cared about, which is important for human wellbeing (McCormack, 2004; MacLeod and McPherson, 2007; Specht, 2009; Rockwell, 2012). McCormack and McCance (2006) describe the importance of interpersonal skills for intentional and meaningful relating. Person-centred practitioners try to remain open to new insights into values, beliefs, experiences, idiosyncrasies and ways of reasoning held by those they are working with, so that they can respond appropriately (Woodrow, 1998; Webster and Cowart, 1999; Chenoweth et al., 2011).

Shaun: 'Can you describe factors that enabled or impeded relational connectedness while facilitating your study?'

Famke: 'In the moments where I experienced optimal relational connectedness, both the other and I were open to sharing who we were as well as what our needs and desires were. We were able to find commonalities and move forward together. What I also discovered was that seeking out and working in different "spaces" – whether that be physical spaces outside the ward unit or mental spaces by using creative expression – also deepened and strengthened the sense of connectedness. This was even true in my interactions with the charge nurse, but the relational connectedness fluctuated a lot. Her not following through on agreed action plans once she was submersed in the chaos of everyday life did not help. Neither did the fact that when I was present in practice, I was usually busy in different parts of the unit to her, so we seldom checked in with each other outside our planned meetings.

'What I also struggled with was a kind of tension between the aims of a critical paradigm, raising awareness of factors sustaining unwelcomed states, and characteristics of person-centeredness such as showing compassion and sympathetic presence. After presenting the initial culture analysis findings, I wrote the following down: "I feel sorry for them [unit team] and what is happening all around them, but I'm concerned that if I say this to them they will feel bad and sorry for themselves, and possibly become more passive and less inclined to actively participate in the study". Thinking back, this is where my persistent focus on being critical, and urge to keep doing in order to achieve change, may have held us up. If I had shifted my focus away from my own agenda and concentrated on accompanying them in working through the emotional confrontation of seeing their own culture described in black and white, it would have been easier to retain, or even strengthen, a sense of relational connectedness.

'Can you recognise what I have described in the processes of your person-centred leadership framework?'

Shaun: 'Yes, I see all five processes we identified for enabling and maintaining relational connectedness in the scenarios you just described. We found that a leader gathers and analyses information by: using their senses (sensing); seeing the person embedded in many contexts, not just work (contextualising); being aware of differing needs (balancing); being present and thinking with someone (presencing); and dialoguing with them with an intent of enabling action (communing). Working with these processes collectively and/or individually influences the stance or approach a leader takes in relation to others. Leading from the front entails offering to role model or 'do for' the other person, while instruction and/or advice is offered when leading from the sideline. Leading from alongside involves high challenge and high support in close proximity, while leading from behind is taking a step back and observing without disengaging. When you describe your hesitancy in feeding back the initial culture analysis findings, you sensed that this would be emotionally confrontational for the team. However, it seems you decided to facilitate from behind, taking a step back and observing without disengaging. When you go on to describe how you could have shifted focus from your own agenda, you are in fact describing (morally) balancing differing needs, which would have influenced your stance. You saw the team in context and how organisational dynamics were affecting them, but "presencing" was something you said was difficult for you to enact in that situation. However, in your initial description of moments when you felt relational connectedness was enhanced, you were clearly engaging in the process of communing – communicating at a more intimate level in order to find common ground and vision from which to move forward together. Using the five processes explicitly, and choosing an appropriate stance, enables relational connectedness because the facilitated person feels acknowledged and cared about as well as a sense of belonging to something bigger than themselves. Although needing further research, my experiences and data suggest that the facilitator will experience the same feelings."

Principle 4: Consciously working with context and cultures

Although this principle may at first seem odd to some when talking about being person-centered, actively working to create contexts and cultures conducive to person-centeredness is explicitly described in the literature. McCormack and McCance (2010) describe how staff relationships influence the development of person-centred cultures within a workplace.

Shaun: 'From the perspective of context I noticed you formulated two messages in your thesis: "engaging with the context in order to understand it" and "adopting a flexible approach to facilitation". Can you link these messages to person-centred facilitation as creating relational connectedness to enable others and self to come into own?'

Famke: 'The focus of my study was the development of an effective workplace culture as a condition that could enable growth and flourishing. While trying to understand the existing culture, I was overwhelmed by the multitude of relational and cultural layers within one unit, spread over two hospitals, each accommodating a collection of individual teams. To facilitate in this situation meant that I needed to be extremely flexible. I discovered the need continuously to adapt my being as a facilitator in order to meet individuals and teams, where they were at and the way they were used to doing things. Positioned within this complexity, I was searching for the right space and place for me, to move into cycles of action. This meant that I was engaging with many different key stakeholders, each time adapting my facilitation to connect with the individual and their idioculture. This deflected my attention away from focusing on developing deeper relationships

with a few individuals. The complexity and diversity diluted the depth of relationships, in particular my relationship with the charge nurse.

'Once able to work with smaller teams on concrete issues they had identified, it was easier to position myself and to enable the actualisation of agency. For instance, in one team a work group invited me to observe their meeting culture. Feeding back my observations and engaging in dialogue with them on how they thought they could improve meeting effectiveness, I observed in the subsequent meeting that they had changed the structure and the way they interacted.

'So working with new complex contexts and cultures, a facilitator should be mindful of the influence group size and diversity, as well as which issues are given priority, will have on relationships. By doing so a facilitator creates space for self and being in relation with others, and so deepens person-centred relationships that enable mutual growth.'

Shaun: 'My starting point was different. I was a colleague and fellow doctoral student with the same supervisors, but my journey started later. I listened to and learned from your experiences. Consequently, I made a conscious agreement with the research setting that we would start with the leaders of one unit located in one physical setting. While my research question focused on exploring and developing leadership relationships, it did not deter me from paying attention to, and working with, the context. I remember being alert to working with existing structures, conventions and practices when identifying spaces for us to engage in research activities. For instance, I observed that staff shared a lot of stories during their daily 20-minute evaluation meetings. We used this space to gather staff stories about care during the orientation phase, and later to conduct storytelling sessions as a strategy for developing person-centeredness. In doing this, I showed recognition and respect for their current culture and didn't pull them out of their daily rhythm, or impose things that could have been experienced as "extra activities".

'We also used issues the team had about existing structures not only to change these structures but also to create new spaces for the exploration and development of person-centred leadership. Staff were concerned about how the existing system of allocating nurses to patients per shift was not conducive to coordination and continuity of care. Implementing primary nursing not only had a positive effect on coordination and continuity of care, it also enabled the charge nurses and newly appointed primary nurses to work alongside (student) nurses during the provision of care. This closeness then enabled them to develop deeper relationships and reflect on how they could be person-centred with colleagues. From my own perspective, working primarily with the manager, charge nurses and primary nurses each week, and engaging in various activities such as reflective sessions and participant observation, meant that I could focus on developing personcentred relationships too. That I was able to position myself within the context and culture helped participant leaders and staff to see a relationship with me as advantageous.'

Conclusion

Person-centred facilitation is not just about helping others to change their current situation. It is also about being attentive to the personhood of others and self, embedded within complex and dynamic contexts. It's important for facilitators to appreciate that there exists mutual influencing between people in relation and the contexts in which they find themselves, so relationships are fragile (Principle 2). Not only are individuals characterised by personal values and beliefs, practice contexts also have deep-rooted structures and conventions that influence their being. The facilitator needs to be flexible in working with the current state of being of people, contexts and cultures, moving fluidly along the technical-emancipatory facilitation continuum so that connectedness is retained and growth fostered (Principles 2 and 4). The process of enlightenment aimed for in emancipatory practice development can be confronting as people are invited to (re)assess and change their current values, beliefs and contexts. We therefore feel that a person-centred facilitator does well to focus initially on developing

relational connectedness with participants before shifting the collective focus onto developing contexts and cultures (Principle 3).

Both interpersonal and intrapersonal factors influence the development of relational connectedness. The person-centred facilitator not only needs to reflect critically (and creatively) on self in context and relation, but also on the personal value system influencing their own being and doing. Creating space and making use of support systems, internal and/or external to the practice context, can help the facilitator achieve internal balance and grow alongside others and contexts. In doing so they learn to understand and value self as well as retain a sense of connectedness with other(s) as they invite and receive respect and acknowledgement (Principle 1). There are no sequential steps or processes for person-centred facilitation; it entails constant listening to self, others and context so that appropriate and intentional action can be undertaken.

Implications for practice

Facilitation and person-centeredness are key concepts in practice development. However, personcentred facilitation can be fragile when reflexivity and openness within relationships is not sustained in a supportive context. We propose that facilitators could use the four principles presented in this paper for being and becoming person-centred. Facilitators, and novices in particular, may overlook and/or underestimate the importance of knowing self and find themselves in a vulnerable position as the competences required to develop and sustain relational connectedness are rich and complex. This can be accentuated when the practice context is not prepared to wait for facilitator self-directed growth. This justifies the advised use of a support system (van Lieshout, 2013) and reflecting on these interrelated principles can help facilitators monitor their development of person-centred relationships with others.

Critical companions of facilitators may find the following questions useful:

- How can/did you achieve other-centredness without losing sight of your own being, doing and becoming?
- How can/did you achieve the flexibility needed to move with a constantly evolving state of self/ others/context?
- How can/did you maintain relational connectedness with those you are/were facilitating?
- How can/did you work with actual contextual cultural values and beliefs while remaining true to an emancipatory intent?

Person-centred facilitation is a relational approach to developing practice, and is far from easy to achieve. We propose that the four principles presented in this paper could support facilitators in building reciprocal relationships of mutual growth while working with and in dynamic contexts. Further theorisation of the principles and exploration of their use in practice will form the next phase of their development.

References

- Cardiff, S. (2012) Critical and creative reflective inquiry: surfacing narratives to enable learning and inform action. *Educational Action Research*. Vol. 20. No. 4. pp 605-622.
- Cardiff, S. (2014) *Person-Centred Leadership: A Critical Participatory Action Research Study Exploring and Developing a New Style of (Clinical) Nurse Leadership.* (PhD). Belfast: University of Ulster.
- Chenoweth, L., King, M., Luscombe, G., Forbes, I., Jun-Hee, J., Stein-Parbury, J., Brodaty, H., Fleming, R. and Haas, M. (2011) Study protocol of a randomised controlled group trial of client and care outcomes in the residential dementia care setting. *World Views on Evidence-Based Nursing*. Vol. 8. No. 3. pp 153-165.

Heron, J. (1999) *The Complete Facilitator's Handbook*. London: Kogan Page.

Kitwood, T. (1997) On being a person. Chp 1 *in* Kitwood, T. (Ed.) (1997) *Dementia Reconsidered: The Person Comes First*. Milton Keynes, UK: Open University Press. pp 7-19.

- Klaver, K. and Baart, A. (2011) Attentiveness in care: towards a theoretical framework. *Nursing Ethics*. Vol. 18. No. 5. pp 686-693.
- MacLeod, R. and McPherson, K. (2007) Care and compassion: part of person-centred rehabilitation, inappropriate response or a forgotten art? *Disability and Rehabilitation*. Vol. 29. Nos. 20-21. pp 1589-1595.
- McCormack, B. (2004) Person-centredness in gerontological nursing: an overview of the literature. *International Journal of Older People Nursing*. Vol. 13. No. 3a. pp 31-38.
- McCormack, B. and McCance, T. (2006) Development of a framework for person-centred nursing. *Journal of Advanced Nursing*. Vol. 56. No. 5. pp 472-479.
- McCormack, B. and McCance, T. (2010) *Person-centred Nursing; Theory, Models and Methods*. Oxford: Blackwell.
- Rockwell, J. (2012) From person-centered to relational care: expanding the focus in residential care facilities. *Journal of Gerontological Social Work*. Vol. 55. No. 3. pp 233-248.
- Rogers, C.R. (1980) A Way of Being. Boston: Houghton Mifflin.
- Shaw, T., Dewing, J., Young, R., Devlin, M., Boomer, C. and Legius, M. (2008) Enabling practice development: delving into the concept of facilitation from a practitioner perspective. Chp 8 in Manley, K., McCormack, B. and Wilson, V. (Eds.) (2008) International Practice Development in Nursing and Healthcare. Oxford: Blackwell. pp 147-169.
- Slater, L. (2006) Person-centredness: a concept analysis. *Contemporary Nurse*. Vol. 23. No. 1. pp 135-144.
- Specht, J. (2009) Partnering for care: the evidence and the expert. *Journal of Gerontological Nursing*. Vol. 35. No. 3. pp 16-22.
- Van Lieshout, F. (2013) *Taking Action for Action: A Study of the Interplay between Contextual and Facilitator Characteristics in Developing an Effective Workplace Culture in a Dutch Hospital Setting, through Action Research*. (PhD, unpublished). Belfast: University of Ulster.
- Webster, J. and Cowart, P. (1999) An innovative professional nursing practice model. *Nursing Administration Quarterly*. Vol. 23. No. 3. pp 11-16.
- Woodrow, P. (1998) Interventions for confusion and dementia 5: changing cultures. *British Journal of Nursing*. Vol. 7. No. 21. pp 1329-1331.

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