

# Health

AT COVENTRY UNIVERSITY

ISSUE 1 2009

## BUILDING A HEALTHY FUTURE

How the new HDTI building is helping to shape the future of healthcare

## A WELCOME INTERVENTION

How research is developing successful health interventions

## RISKY BUSINESS

Professor Brian Toft explains how he's creating investigative students



# Welcome



to the first edition of **Health** – the new magazine aimed at showcasing Coventry University’s positive contribution to the organisation and delivery of healthcare in the UK and globally.

Inside you’ll find articles and interviews that demonstrate our engagement with the health agenda and reference points for you to contact us for more information.

You might be surprised by the breadth of work undertaken at Coventry, which includes our applied research with a range of UK and international partners, consultancy, development of spin out companies, short courses, CDP courses and the initial education and training of 13 health and social care professions.

Health permeates all parts of the University; from the Faculty of Health and Life Sciences (HLS) where we are developing the future and current healthcare workforce to the School of Art and Design who are designing facilities for children with autism.

It reaches into the Faculty of Engineering and Computing who are launching a new course for Clinical Bioengineers and into the Health Design and Technology Institute who are working with SMEs to explore the role of assistive technologies in independent living.

Our primary goal is to improve patient care and the delivery of services. We are achieving this through our research – a proportion of which was recently recognised as world-class in the Research Assessment Exercise 2008 – through evaluation and by working with local/regional healthcare providers.

One local partnership project recently won an Oscar for Outstanding Service at

the University Hospitals Coventry and Warwickshire (UHCW) annual awards. It recognised the work our midwifery staff did with the maternity unit UHCW, Coventry NHS and Mamta to improve community midwifery practice and reduce infant mortality in two wards in Coventry.

Our partnerships are a key feature of our work and extend to service users, NHS organisations, social care, the independent and charitable sectors and other educational institutions in the UK and overseas. Dr Guy Daly’s article on Choice, Personalisation and Control for Users in Health and Social Care on page 12 demonstrates the need for this joined up working.

These partnerships are helping fuel the courses and training we provide. As Lord Darzi’s review stressed recently – the development of the current healthcare workforce is important, as the majority of them will be responsible for the healthcare provision of the future.

To ensure smooth communication between the University and healthcare organisations looking to develop their existing workforce, we have appointed Natalie Mills to be a dedicated point of contact for Continuing Professional Development (CPD) in health. You can Contact Natalie on [n.mills@coventry.ac.uk](mailto:n.mills@coventry.ac.uk) or visit our dedicated website on [www.coventry.ac.uk/cpd](http://www.coventry.ac.uk/cpd).

I hope you find **Health** interesting and a reflection of the breadth, vibrancy and creativity of the work that is undertaken at Coventry University around the health agenda.

Please get in touch with your comments and suggestions for items you would like us to cover in future issues by emailing [gail.williams@coventry.ac.uk](mailto:gail.williams@coventry.ac.uk)

## **Dr Linda Merriman**

Dean of the Faculty of Health and Life Sciences (HLS)

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## Mobile working strategy wins award

The development and pilot of innovative mobile working strategies for social workers earned one Coventry student the 2008 NHS Heart of England Foundation Trust Prize.

The annual prize is awarded for innovation in the field of healthcare, and Social Work student Kevin Farquharson demonstrated that with the work he has been doing with Warwickshire County Council into mobile working.

Kevin received the prize in November last year from Dr Annie Pullen, Course Director for Social Work and Dr Julie Gipton from the Allied Health Professions Advisor Heart of England Foundation Trust and Birmingham Eastern & North PCT Birmingham Heartlands Hospital.

“It was a great pleasure to present the award to Kevin,” said Dr Gipton. “The work he has been involved with sounded exciting and very relevant to modern practice and to the challenges of time and information management in social work. I wish Kevin all the best with the remaining part of his course.”

Kevin Farquharson receives his prize



## Excellent delivery for nursing and midwifery

The Nursing and Midwifery Council (NMC) has given Coventry’s Nursing and Midwifery courses and resources a positive health check – awarding them the highest award possible.

The NMC, the professional body for nursing and midwifery, annually assesses universities, but due to the quality of its courses, Coventry will now become one of 31 universities (out of a total of 85) who can do a self-assessment in 2008/09.



The 2007/08 assessment confirmed that the NMC has ‘confidence’ in the health provision at Coventry University and awarded the quality of its courses a ‘good’ grade and gave an ‘outstanding’ grade (the highest award) for its resources, in particular for the skills laboratories and the library.

The two-day in-depth assessment visit included inspections at all of the NHS Trusts and independent placements that support the students’ education. Partnerships between all of the organisations were considered excellent with commendation for the practice facilitators who demonstrated enthusiasm and commitment.

The NMC has introduced the risk monitoring process to highlight any risks that could undermine standards of course provision and the students’ ‘fitness to practice.’

Christine Whitney-Cooper, Head of Nursing at Coventry University said: “The Directors of Nursing have commended us on the quality of the nurses that come from Coventry University but it is good to feel that confidence had also been confirmed by our professional body too. This is an amazing achievement and recognises all of the hard work that the University staff and our clinical partners put into making our courses such a success.”

## Free Interprofessional Learning Resources

The Centre for Interprofessional e-Learning (CIPeL), which is a Centre of Excellence for Teaching and Learning, has spent four years developing a range of learning resources for educationalists and healthcare professionals, across the UK and internationally, that are interested in promoting interprofessional working.

The Learning resources currently available range from authentic patient journeys and case studies focusing on a wide-range of conditions, anti-oppressive practice resource available in six different languages, and various presentations on quality of life, effective communication, phantom phenomena and pain – among others. The resources vary in terms of duration, interactivity and the types of media used (including audio, video, animation, text and graphics).

There are additional resources for Continual Professional Development, such as management and leadership, reflection, communication, research, examination of the newborn, hand washing techniques, and assisted guidance on how to complete NRES forms.

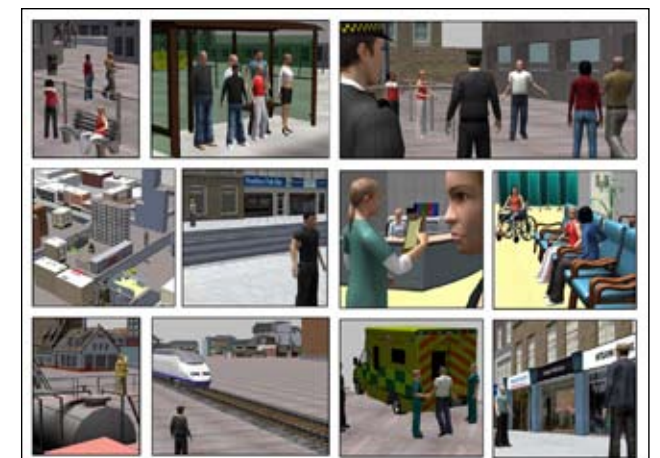
Other projects nearing completion are an innovative 3D resource for moving and handling, a resource for cardiopulmonary resuscitation, mental health advocacy and interprofessional mentorship in practice settings.

All of the centre’s resources are included in an online database called the CIPeL @ CURVE repository system, which was launched in November 2007 and now has over 70 registered users.

CIPeL encourages the use of these e-resources by other educationalists and those in practice. In return the centre only requires feedback on how the resources have been used and how they were received.

For more information about CIPeL, or to register for access to its learning materials, please visit [www.cipel.ac.uk](http://www.cipel.ac.uk) or email Marie Krumins, Centre Manager at [marie.krumins@coventry.ac.uk](mailto:marie.krumins@coventry.ac.uk)

CIPeL’s Street Learning project



## Global support for young people with cancer

The success of an innovative online course is helping health professionals around the world meet the care needs of young people with cancer.

The special postgraduate course was developed in 2006 by the University, in partnership with Teenage Cancer Trust – the national charity which helps young people fight cancer.

The charity, with a donation from financial institution Scottish Widows, wanted to develop more training for people working with teenagers and young people with cancer whose specific needs are often ignored.

Coventry developed the course to be delivered totally online because it was difficult to release clinical colleagues from practice and to ensure international experts could contribute to the learning materials.

The course consists of three modules – two are subject-specific and the third is a work-based learning project. Teaching materials include online discussion forums, narrated PowerPoint presentations, audio and video recordings featuring international experts and patients.

Many projects started on the work-based learning module have continued, such as an art project, a national study day and the production of a DVD for health care professionals, and project managing the development of a Teenage Cancer Trust unit.

The course delivery and the online forums were rated highly by the first cohort of 22 students from the UK, Australia and New Zealand, which included mostly nurses and one charity worker.

Now running for the second time, with improvements, the course has attracted a wider range of professions, including doctors, social workers, occupational therapists and researchers, from the same countries as well as USA, Canada and Sweden.

## Mark of approval

All of the Faculty of Health and Life Sciences undergraduate 'pre-registration' courses were successfully re-approved last year.

The Nursing and Midwifery Council, Health Professions Council and the University all approved awards in Dietetics, Midwifery (Long and Shortened programmes),



The course is still supported by Teenage Cancer Trust and the University has also developed a partnership with CanTeen – the Australian National Charity for teenagers with cancer.

Course Director Maria Cable said: "While the UK's medicine and services for teenagers and young adults with cancer may be more developed, the rest of the world is now catching up. This course is helping national and international individuals, and subsequently organisations, meet the needs for this niche group of patients."

Young people can get some of the most rare and aggressive forms of cancer and in the UK six young people a day have to face that diagnosis. The emotional upheaval of adolescence can make a cancer diagnosis even harder to cope with.

Nigel Revell, Director of Education at Teenage Cancer Trust said: "Teenage cancer requires specialist care. Young people have a much better chance in their fight against cancer if they are treated by teenage cancer experts, in an environment tailored to their needs. It is vital that the staff caring for these young people also understand their needs. This course provides this education."

**For further information about the course please contact Maria Cable on [m.cable@coventry.ac.uk](mailto:m.cable@coventry.ac.uk) and for more information about the charity visit: [www.teenagecancertrust.org](http://www.teenagecancertrust.org)**

Nursing (all four Braches), Occupational Therapy, Operating Department Practice, Paramedic Science and Physiotherapy.

Innovations in the curricula in relation to leadership and management, combating inequalities, evidence based practice and inter-professional learning continue to be key features of these courses.

## New doctorate for health and social care

A new part-time professional doctorate in health and social care is being launched in September 09 to meet the learning needs of busy practitioners.

Using online delivery, combined with face-to-face research supervision and conferences, the programme will include a range of taught modules in health specialisms and research methods.

Students will identify a professional issue – ideally a question they are currently facing within their workplace – which they would like to explore further through independent research. The modules will prepare students for a final integrative report or thesis and are designed for health and social care professionals who want to further their development as expert practitioners and researchers.

Students will develop critical thinking about practice and health service delivery and address professional issues such as ethical matters and evidence and values-based practice.

The doctorate will be a comprehensive research project that can be either a large research programme or a portfolio of work-based interventions.

A one-year module will also be available to prepare students for learning at doctoral level to help them develop the skills needed for their particular research.

Accreditation of prior learning will be a possibility for students with existing higher qualifications.



**For more information contact Ann Green, Professional Doctorate Programme Lead [a.green@coventry.ac.uk](mailto:a.green@coventry.ac.uk)**

## Service improvements for students

The quality of healthcare at pre-registration level has improved thanks to a successful pilot scheme that has been running at Coventry University and three other institutions.

The NHS Institute for Innovation and Improvement NHSIII, instigated the pilot after it recognised healthcare students were not taught to understand or know how to tackle system failures until after they had registered.

There was some activity, post-registration, to involve healthcare professionals in clinical governance, quality and the principles and practicalities of service improvements but historically, the emphasis at pre-registration was on clinical/professional education.

Since 2006 the NHSIII has been working towards making service improvements an integral part of pre-registration education rather than being seen as an optional extra after registration.

Coventry University was one of the initial sites, along with Warwick, Teesside and York St John, to be commissioned by the NHSIII to develop and pilot service improvement with its students. The pilots have been externally evaluated and proven to be successful.

HLS Senior Lecturer in Healthcare Management Sue Lister has been working with the NHSIII on this initiative since 2006 and helped introduce the changes to Coventry. The theory of service improvement is

currently offered in mandatory modules on leadership and change to all students studying all strands of nursing, dietetics, midwifery, occupational therapy and physiotherapy. In the newly validated courses, it will be in the same modules and the students should gain practical experience in the inter-professional strand of the modules.

After the successful implementation at Coventry Sue has now been seconded to the NHSIII for two years to facilitate a role out of the initiative to other universities that provide pre-registration education to healthcare professionals.

# Building a healthy future



As the doors to the new building of the Health Design and Technology Institute get ready to open, its Director Simon Fielden explains why it has an important role to play in delivering the healthcare of the future

For the first time ever, the percentage of the UK population aged under-16 has dropped below the percentage of the population of state pensionable age\*.

The continuing rise in the number of older people is creating challenges for the health and social care sectors as well as demands for new products and services to support this growing community.

Coventry University's Health Design and Technology Institute (HDTI), now in its second year, was created to assist in the development of a wide range of healthcare products that would support the needs of an ageing population, people with physical disabilities and those with chronic health conditions.

The HDTI has been built on the University's strength in health and design and its track record in knowledge transfer to industry. On the eve of its new building opening in May this year, the HDTI has already helped over 50 organisations develop new products for the healthcare market. The Institute has created a supportive environment where businesses can interact with healthcare practitioners and end-users in the development of new community healthcare products and services.

When complete, the new building will house a design studio, workshop and mock up area where users can trial and evaluate a product within an appropriate environment. This will be complemented by a usability suite incorporating discreet audio visual recording equipment.

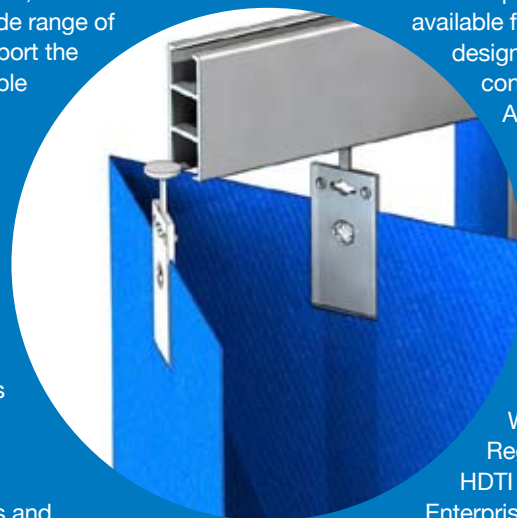
Through the use of focus groups, recorded usability studies and field trials, the HDTI offers clients a unique opportunity to test innovations with their intended end users. As well as providing invaluable information that feeds back into the design process, the final report at the end of a study provides the client with an independent, rigorous, academically-led body of evidence that can be used in support of a product's marketing claims.

There's also professional, specialist design support available from the HDTI's in-house product design team. This can range from early conceptualisation through 3D Computer Aided Design (CAD) modelling to rapid prototyping.

As well as accommodating two lecture theatres and offices for HDTI staff, the new building will also include a bistro and office space for businesses to rent, with hot-desking facilities for pre-start up companies.

Financial support from Advantage West Midlands and the European Regional Development Fund enables HDTI to provide Small and Medium Size Enterprises (SMEs) in the West Midlands region with five days of funded consultancy activity. It's an extremely flexible provision and the time can be made up of product design, prototyping or usability.

These partnerships have resulted in award-winning new products making a difference in the healthcare sector. Collaborative work on a novel fixing clip for disposable hospital curtains earned the HDTI and Birmingham-based



The new HDTI building under construction



Opal Contracts a Highly Commended award in the Achievement In Innovation category at the 2008 Lord Stafford Awards. Since the product's launch in late 2007, Opal has secured sales in excess of £1.2 million and is waiting to hear the outcome of a multi-million pound NHS tender.

It is product success like this that the new HDTI building will encourage. Imperative work if we are to cope with the increasing demands in the way we want our healthcare delivered.

\* National Office for Statistics, August 2008



Top marks: Vice Chancellor Professor Madeleine Atkins congratulates the construction team on hitting their milestone at a topping out ceremony for the new HDTI building

## Four areas of HDTI activity:

1. The design and evaluation of products and services required for improved healthcare in the community and the self-management of health and wellbeing
2. Continuing professional development and training of community-based healthcare professionals, carers and self-managing patients to make full use of assistive technologies products and services
3. The delivery of undergraduate and postgraduate courses in health and social care, design, engineering and management
4. Applied research projects in collaboration with faculties and external partners.

# A welcome intervention

Since the launch of the applied research centre in Health and Lifestyle Interventions, investing in key academics who lead effective teams has been the major factor in our recent successes. Professor Louise Wallace explains how the new centre has made an impact with its research

When two research centres combined forces in 2006 to form the Health and Lifestyle Interventions (ARC HLI) applied research centre, it proved to be a successful venture.

The centre's purpose was to develop complex behavioural interventions for health, evaluate them and ensure they can be used in practice. Now in its third year the ARC HLI is providing high quality applied research, consultancy and postgraduate training – all underpinned by one of its core competences, health psychology.

Key appointments enabled the ARC HLI to get off to a great start and ensured we had serious academic leadership in place to tackle substantial research projects.

We were fortunate to secure the expertise of Dr David French, a skilled researcher and health psychologist, who now has three PhD students working with him and has already attracted a large Medical Research Council grant worth a third of a million pounds for a project called: The development of an intervention to promote walking in primary care.

We have also appointed Professor Brian Toft (see interview on page 14), who is experienced in Patient Safety Investigations and he is now leading the development of the course on Root Cause Analysis in patient safety. This complements Department of Health funded research we had underway on learning from patient safety incidents and investigations; and evaluating staff training.

These as well as other new appointments and secondments are paying off. We have brought in over £1 million in both the first and second year and we now have 29 staff and students (nine of them are PhD students).

## Practical use

We are keen to make sure our research is well used – we publish in high impact journals and we make our work known to policy makers. We also want to see our interventions being used practically to make a health impact. Some of

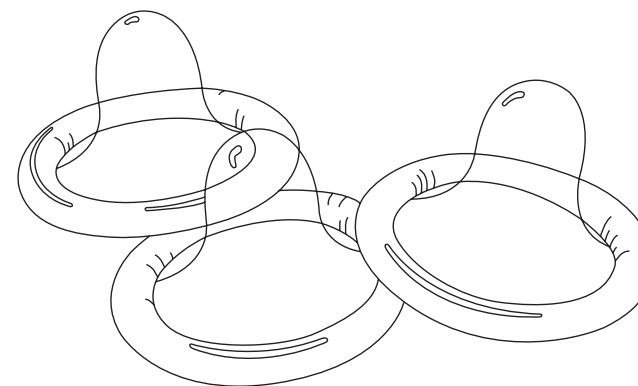
the projects we are currently leading the way in range from training health professionals in breastfeeding support and working with local health and council services in the promotion of breastfeeding, to undertaking evidence reviews to support the National Institute for Clinical and Health Excellence (NICE) guidance.

Our breastfeeding research has led us to create a commercially available learning package for health professionals to help them support more mothers to breastfeed their babies. A new training assessment called CUBA (Coventry University Breastfeeding Assessment) and a workbook with a DVD is available for sale through the centre's spin out company Health Behaviour Research Limited ([www.healthbehaviourresearch.co.uk](http://www.healthbehaviourresearch.co.uk)). A demo of the CUBA and a workbook sample can be downloaded from the site too.

This company was formed in 2006 to produce evidence-based intervention tools and make them available to a wide-range of people globally. The CUBA is already being used in the USA and Canada as well as in the UK.

A large pilot study is currently underway in the West Midlands, with funding from the West Midlands Regional Office, to help 900 healthcare staff across three healthcare economies to learn more about breastfeeding using the CUBA and the workbook.

We have also secured research grants from the NHS and from a global corporate to help develop Dr Katherine Brown's work on promoting contraception and reducing sexual



risk in young people. Dr Brown is leading the work on teenage pregnancy and recently presented her research findings at an international conference in Macau on contraception. We have developed a programme for Coventry Primary Care Trust called 'What Shall We Tell The Children About Relationships and Sex?' which offers advice to parents who have children aged five to 15. It is being delivered throughout Coventry and Warwickshire by facilitators and due to its success Coventry PCT is making it commercially available to other PCTs.

## Supporting long-term illness

One of the largest projects we are working on at the moment is evaluating the Health Foundation's Co-creating Health project ([www.health.org.uk/cch](http://www.health.org.uk/cch)). The project, led by myself and Dr Andrew Turner with a team of six staff and a PhD student, operates in eight health care economies and four comparator health care economies involving 28 NHS trusts across England and Scotland. It tests the impact of interventions to support people with four common long term conditions: Chronic Musculo Skeletal Pain, Diabetes, Chronic Obstructive Pulmonary Disease (COPD) and Depression. ARC HLI is evaluating the Health Foundation's self-management course for patients, a clinical development programme for clinicians to train them to support their patients to self-manage, and a service improvement quality development to improve the

organisation and functioning of services to support self-management.

As a result of our prominent role in the evaluation of this high profile national demonstration project we have significant opportunities to develop new interventions. Much of our work is about transforming patients' engagement in their healthcare through support and by helping clinicians to use more effective communication strategies.

A project that demonstrates this type of work is the evaluation we are doing on an innovative approach to improving communication and decision-making between cancer patients and their clinicians in Edinburgh. We are also developing an intervention to improve Chlamydia screening by General Practitioners in Southern England.

It's not a lone crusade though. The centre has established strong links with many universities, and with Warwick Medical School in particular. In much of our work we partner with others in the University and CUE Limited.

The HLI has already worked on a Breastfeeding DVD with the Institute of Creative Enterprises (ICE) and is in collaboration with the Serious Games Institute (SGI) on the next phase of the parent programme. We're currently submitting a joint bid with the Business School around technology adoption, which will also call on the HDTI's expertise.

As we move into 2009, our aim is to expand our portfolio of collaborative projects with other universities and to find new ways to showcase and commercialise our interventions.

## Key appointments

Funding has helped the ARC HLI appoint some key members to the team.

- Dr David French: recently undertaken advisory work for the Department of Health related to health psychology, as well as led the scientific committee of the largest European health psychology conference to date.
- Dr. Jemma Edmunds, a postdoctoral fellow, is working alongside David, investigating exercise intervention for women who are pregnant and obese; a major health risk for mother and baby.
- Brian Toft: experienced in Patient Safety Investigations and developing a new course.
- Dr Louise Moody: part-time seconded from the Faculty of Art and Design to work with Brian Toft and Louise Wallace to research ergonomic approaches to patient safety.
- Dr Orla Dunn, senior lecturer in Psychology and Sue Law, senior lecturer in midwifery: both part-time secondments from Faculty of Health and Life Sciences to support breastfeeding intervention development.

# A healthy choice

As choice and personalisation in the provision of health and social care climb the political agenda, Dr Guy Daly, Associate Dean of HLS, debates the implications and looks at how Coventry's lecturers and researchers continue to respond to the changes

Any call to have more control over the way we receive our health and social care would find little opposition. But the higher we aim, the greater the challenge.

Government policy has continued to promote choice and personalisation; both in the provision of health and social care as well as more generally.

For social care, this was articulated in the 2005 Adult Social Care Green Paper (DH, 2005), the subsequent White Paper (DH, 2006) and more recently in Putting People First – A Shared Vision and commitment to the transformation of Adult Social Care (HMG, 2007), Transforming Social Care (DH, 2008) and Care, Support and Independence – Meeting the Needs of a Changing Society (HMG, 2008).

In health care, the Darzi Review (DH, 2007) suggested that the personalisation agenda might be extended to long-term health care.

But what is the driving force behind the Government's call for patients and social care service users to have greater choice, personalisation and control?

Government uses choice in a variety of different ways, including as a means to challenge supplier dominance and to provide personalised services, as well as being presented as a mechanism to 'democratise' and 'equalise' welfare provision.

User choice and personalisation have been promoted widely, for example in health care with 'choose and book' for hospital admissions, in social housing with the introduction of 'choice based lettings', in education with the establishment of city academies and foundation schools and faith-based schools, and in social care with the expansion of direct payments, the promotion of individualised budgets and the encouragement of the Third Sector to provide social care.

So, on the one hand, enforcing greater choice into the health system could be perceived as the Government re-branding its social policies within a populist hue so it can, once again, challenge welfare professionals' perceived supplier-dominance.

From this perspective, various questions and critiques can be raised about the Government choice discourse. For example, choice may exacerbate inequalities – not least because access to welfare services is shaped by economic and social capital and social inequalities more generally.

However, the Government may well be responding to a genuine call from service users, individually and collectively, to have greater choice and control over the public services they receive.

The disability rights movement for one has argued for some time that choice and control are essential if disabled citizens are to enjoy the equal rights.

However, if health and social care users are to exercise greater choice and control, there are a number of challenges that still need to be addressed:

- an adequate supply which is flexible and responsive
- service users need to have the skills to take on new responsibilities
- professionals need to recognise to a greater extent that their role is changing
- the development of effective advocacy services and support
- not all service users/patients will necessarily want to take up choice and personalisation opportunities.



Within Coventry's Faculty of Health and Life Sciences, we have considerable experience of embedding the central position of service users and patients into our activities. It's done through curriculum development, selection of students and staff, teaching, learning and assessment and research.

Both undergraduate and postgraduate curricula for the fourteen health and social care professions provided by the Faculty have at their core a recognition of the centrality of the service user/patient. This was recognised most recently in March 2008 by the Nursing and Midwifery Council (NMC) and the Health Professions Council (HPC) when the Faculty's undergraduate curriculum was re-approved by these two statutory bodies.

For a number of years service users and patients have been involved in the selection of students as well as in teaching and assessing.

The Faculty's Centre for Inter-professional e-Learning also has the 'user's voice' as a key part of its activities.

A number of the Faculty's researchers, including those in the Centre for Health and Lifestyles Interventions, as well as the Applied Research Groups in Public Health, Living and Working with Disabilities, and Social Inclusion in Social Care are actively engaged in researching the experience and perspective of service users and patients. Research topics include expert patients, individual budgets, long term conditions and co-creating health.

The courses and research are all geared towards ensuring our undergraduate and postgraduate students are equipped with the necessary skills and understanding to support service users and patients in their aspirations.

No doubt the debate surrounding choice and personalisation and the related issues on inequality will continue, but the University will always be at the forefront of research and informing practice.

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Parts of this article are adapted from a previous paper: 'Is choice the right policy?' which appeared in Health Matters, No. 72, pp. 16-17 (Summer 2008)

In the first of a series of profiles, Professor Brian Toft explains how he is helping to develop a new kind of investigative student with an innovative new course

# Risky Business

In the field of risk management, Professor Brian Toft is the investigator you want on your case. His theories around the causes of incidents have been recognised by professional organisations around the world, he is a fellow and member of many recognised institutes, and he has contributed to Government patient safety reviews. As the world's first Professor in Patient Safety, Brian is developing a new e-learning course, which he hopes will create students that dig a little deeper for the reasons why humans sometimes get it wrong.

## Q. What work are you doing with Coventry?

**A.** I started working with Coventry in January 2008 and was asked to create an e-learning postgraduate certificate in Root Cause Analysis. The aim is to develop individuals who can review patient safety incidents with greater rigor than tends to be the case at the moment. Root Cause Analysis is an industry standard term – but the implication that there is just 'one' cause is a misnomer. People frequently do not go down far enough into the individual, group, organisational and cultural reasons for such incidents. I go down as far as I can get to discover the reason something happened and I am creating a course that challenges students to do the same.

The course I am developing with the help of Dr Lynn Clouder, Director of the Centre for Interprofessional E-Learning will be a stand-alone e-learning course. That means it will be totally online and examined in a very innovative way. The only intervention from a teacher will be in the creation of the questions for the examination. Everything will be taught and assessed online. It means anyone in the world can take the course without actually walking into the University.

## Q. How did you get involved in risk management?

**A.** I was interested in why things just don't work sometimes. When there is an accident people often say things like it was 'God's will' that it took place but the truth is there has been some form of human error that caused the incident.



I am, as far as I know, the only person in the world who has a degree in 'Human Factor Failure in Complex Systems' – as Lancaster University allowed me to create my own degree to study human and organisational failure. I subsequently went on to develop my theories in my PhD and, armed with this and a Diploma in Computer Science from Cambridge University, I started as a Research Fellow at Reading University. I developed my career in Risk Management with different companies and now manage my own consultancy – and work with Coventry University one day a week.

I am fascinated by what causes incidents and developed a theory called 'Involuntary Automaticity,' which explains the reasons why under certain circumstances people do not see an error that is actually before their eyes. I received the Glyn Evans Memorial Lecture medal from the Royal College of Radiologists for a lecture I gave on this topic in 2006.

I continue to be a volunteer for many organisations as a risk advisor and non-executive to provide support and strengthen my practical knowledge.

## Q. What do you think about the plans Coventry has in place for the course?

**A.** I am really enjoying my time at Coventry and I am working with some great people. I have to congratulate the institution on its courage for taking such an innovative step by creating the world's first Prof in Patient Safety – and for the development of the course. It's an act of faith and a great honour for me to be a part of it.

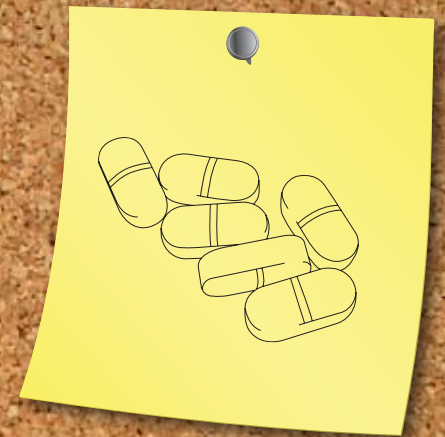
Professor Brian Toft will be presenting his inaugural lecture entitled 'Nobody's Perfect' at 6pm on Thursday 26 February in the Humber Lecture theatre, George Eliot Building. The lecture will examine some of the powerful processes within human beings that can potentially affect good judgement and lead to patient safety incidents. Please contact Gail Williams on [gail.williams@coventry.ac.uk](mailto:gail.williams@coventry.ac.uk) if you are interested in attending.

Coventry University Professorial Lectures

## Nobody's Perfect

**Brian Toft**  
Professor of Patient Safety  
Faculty of Health and Life Sciences

Thursday 26th February 2009 at 6pm  
Humber Lecture Theatre,  
George Eliot Building, Room GEG31



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If you would like to find out more about any of the articles within this issue, if you have a general enquiry about applied research, or to subscribe to future issues of Health, please contact:

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