Case Study Form

Case Study examples of best practice	Projects, practice development and/or improving outcomes, quality improvement studies, achievement awards, making a difference to patients and families, research, community development, education resources and tools,
Case Study Title:	How precision questioning can make Advance Care Planning conversations actually happen
Lead Person/Contact	Saskie Dorman, Siobhan Aris and Helen Slocombe
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Problem
What problem, gap or need have/did you identify?

Advance care planning conversations are widely recognised as important.

They help ensure care reflects what actually matters to each person, rather than what clinical convention assumes. Yet they are frequently not happening, and the barrier is rarely indifference.

Project goal
What is/was the overall goal?
Describe the long-term impact you had or hope to be achieved because of your work.

To use “Clean Language” is a precision questioning technique in a palliative care setting to help people express themselves in their own words, without the questioner's assumptions getting in the way.

Project objectives
What is/are your objectives, or what were the key outcomes you have or expect to achieve?

This case study focuses on one specific application: advance care planning (ACP) conversations.

It draws on the experiences of three palliative care practitioners who were introduced to Clean Language through the NHS England South West End of Life Network and have been using it in clinical practice since 2023: Saskie Dorman, Palliative Care Consultant, Forest Holme Hospice, University Hospitals Dorset NHS Foundation Trust; Siobhan Aris, Developmental Nurse Consultant, Palliative and End of Life Care, Cornwall Partnership NHS Foundation Trust; and Helen Slocombe, End of Life Lead across Bath Swindon Wiltshire (BSW) community.

Main activities
What have/did you do?
List the main activities.

All three practitioners introduced Clean Language questions into their everyday consultations, particularly:

- 'What would you like to happen?'
- 'What kind of...?'
- Applying a trigger word to an open question
- Experimentation in each own setting
- Using each individual's own metaphor ('I'm going to be going over the wall soon').
- Speaking to student nurses about advance care planning, using coaching image cards and Clean Language questions

Strategy (if appropriate if not apply N/A)
How will this work contribute to your local, regional and national strategy?
Which strategic document?

Advance Care Planning tools
Personalisation

Previous work
Do you know of anyone else who is planning to do this/or similar work or has it been done in some way before?
How will/are you building it? How will you monitor your progress?

Conversaurus is currently delivering structured training in hospices in Yorkshire, the North East, and the South West. A pilot at Forest Holme Hospice, funded by University Hospitals Dorset Charities and evaluated by Saskie Dorman, found measurable shifts in communication style and possible reductions in work-related frustration.

That evaluation is to be submitted for peer-reviewed publication. Saskie's team at University Hospitals Dorset has recently launched a Planning Ahead for End of Life electronic form, designed to be simple and accessible. It includes the prompt 'What would they like to happen?' as one of a small number of questions. This is Clean Language embedded directly into institutional practice.

The longer-term goal is for precision questioning to become a standard part of advance care planning training for newly qualified nurses and student nurses, giving every clinician something reliable to reach for in the conversations they currently avoid because they are frightened, not because they do not care.

Timescales
What are/were your timescales for the work?

Since 2023 and ongoing

Impact measures, qualitative and quantitative
What will/have your measures been and how will/have you captured and shared your outcomes?

Patients being able to have a conversation and expressing their wishes/wants in advance care planning

Top tips to share

- Just try it - 'experiment and play and explore.
- ' Feeling clumsy at first is normal. It reflects how different the approach is, not a lack of skill.
- Practising with colleagues first is a low-stakes way to build confidence.
- Choosing one trigger word or moment in a consultation helps integration without having to hold the whole method in mind.
- Student nurses and newly qualified clinicians who encounter Clean Language even once may already be closer to using it than they know. Some are already doing it without knowing its name.
- The fear that makes clinicians avoid advance care planning conversations is not a character flaw. It is the absence of a reliable tool. Give people the tool, and the fear shifts.

Further information/useful resources
Are there any other documents or information you would like to share?
Please upload

conversaurus.com | judy@conversaurus.com | 07979 495509

Clean Language in Healthcare resources page

https://conversaurus.com/clean-language-in-healthcare/

Dorman S, Rees J. Using the communication technique of Clean Language in healthcare: an

exploratory survey. BMJ Open Quality. 2024;13:e003102.

https://doi.org/10.1136/bmjoq-2024-003102

Video interviews with NHS clinicians using Clean Language:

youtube.com/playlist?list=PLEzehoyf73dmMvsq_JFPBIIhuornglPu5

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YES

Are you happy for us to accompany your good practice with a contact name and details?

YES

** Please add contact details if different from above

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