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Simulation-Based Inclusion: Participation, Belonging and Workforce Well-Being

Healthcare systems often speak about the importance of staff engagement, retention and well-being.

What is less often explored is how healthcare systems actively create the conditions in which people feel able to participate, contribute, remain, and thrive within change processes.

In many organisations, staff are asked to adapt to change without being meaningfully included in shaping it. This can lead to disconnection, fatigue, disengagement and reduced psychological safety — particularly within complex and pressured systems.

Within the Transformative Simulation (TfS) framework, the Inclusion Simulation-Based Intention (SBI) is concerned with using simulation to strengthen participation, belonging, empowerment and workforce well-being within healthcare systems.

Unlike Simulation-Based Involvement, which focuses primarily on engaging patients, publics, communities and external stakeholders, Simulation-Based Inclusion is concerned with how people within healthcare systems experience participation in change itself.

The distinction is important.

Inclusion asks:

- Do staff feel psychologically safe to contribute?
- Are people able to participate meaningfully in shaping change?
- Do systems create conditions for belonging and connection?
- Are relationships, communication and collaboration being strengthened?
- Does the process of change itself support or undermine workforce well-being?

Inclusion therefore moves beyond simply “having people present” within a process.

It is concerned with whether systems create the conditions in which people feel:

- valued
- heard
- connected
- supported
- psychologically safe
- able to influence what happens around them

Within TfS, simulation becomes a way of making these relational and organisational dynamics visible — not simply through discussion, but through shared experience.

How Intention Shapes Design

When simulation is designed for inclusion, the focus shifts away from performance and toward participation, relationships and collective sense-making.

This often draws on theoretical traditions concerned with:

- employee engagement
- participatory design
- organisational psychology
- relational coordination
- psychological safety
- workplace well-being
- collaborative systems thinking

Examples include:

- Participatory Design Collaboration Systems Model
- Relational Coordination Theory
- Kahn’s Model of Employee Engagement
- The Surgeon General’s Framework for Workplace Mental Health and Well-Being
- Aon Hewitt’s Engagement Model
- Maslow-informed approaches to workforce engagement and belonging

These theories shape simulation differently.

Rather than focusing solely on whether staff can perform tasks correctly, simulation designed for inclusion asks how systems enable people to:

- communicate
- collaborate
- contribute
- adapt
- connect
- and sustain themselves within change

In this way, simulation becomes not only a mechanism for learning, but also a mechanism for organisational participation and cultural development.

Inclusion and Involvement: Not the Same Intention

In practice, Simulation-Based Inclusion and Simulation-Based Involvement are often conflated.

However, they focus on different questions.

Simulation-Based Involvement asks:

Whose voices need to be brought into the conversation?

Its focus is often on patients, carers, publics and under-represented communities that are affected by healthcare.

Simulation-Based Inclusion asks:

How do we create conditions in which people within systems feel able to participate, contribute and remain?

Its focus is often on workforce participation, belonging, retention and well-being.

In practice, these intentions may overlap — but distinguishing them helps clarify:

- who simulation is for
- what kind of participation is being sought
- what theories may be most useful
- and what kinds of outcomes are likely to emerge

Final Reflection

Inclusion is often discussed as an outcome.

Within Transformative Simulation, it is also understood as a design responsibility.

How simulation is structured — who is present, how participation is enabled, what forms of dialogue are possible, and whether people feel

psychologically safe to contribute — fundamentally shapes what becomes possible within systems.

As healthcare systems continue to navigate workforce pressures, burnout, fragmentation and change fatigue, simulation may have an increasingly important role not only in preparing people for systems, but in helping systems become places in which people are more able to participate, connect and remain.

TFS in Practice: Real-World Spotlights

This recurring section highlights real-world examples of Transformative Simulation in action - across geographies and sectors.

Simulation-Based Inclusion & Involvement



Sequential Simulation for Integrated Care and GP Receptionists

In their 2015 study, Weldon and colleagues used Sequential Simulation (SqS) to help GP receptionists understand their role within integrated care pathways.


The workshops brought together GP receptionists, patients and healthcare professionals to experience and discuss a simulated patient journey across primary and community care. The simulation highlighted how fragmented communication and siloed working could affect patients, while creating opportunities for collaborative redesign.

Importantly, the workshops also created conditions for receptionists themselves to feel recognised, valued and included within wider healthcare conversations. One participant reflected:

“For the first time I actually feel I am a very important link between patient and doctor.”

The study illustrates how simulation can simultaneously support:

- involvement of patients and stakeholders
- inclusion of often overlooked workforce groups
- cross-professional understanding
- confidence and empowerment
- and collaborative reflection on care pathways

 Read the article: <https://link.springer.com/article/10.1186/s12875-015-0327-5>

Simulation-Based Inclusion



Lateral Play and Organisational Collaboration

In their large-scale behavioural simulation study, Cohen and colleagues explored how simulation could support collaboration and shared decision-making across newly formed healthcare partnerships.


Participants from multiple organisations entered a simulated healthcare system and worked through complex organisational challenges involving service redesign, accountability and integrated care planning. The simulation revealed tensions, competing priorities and relational dynamics that would likely emerge within real implementation processes.

Over time, participants increasingly shifted toward collaborative thinking, relationship-building and collective problem-solving. Observational findings highlighted the importance of:

- legitimacy
- shared purpose
- communication
- transparency
- and cross-organisational trust

Participants described the simulation as helping break down organisational silos and creating greater awareness of partnership working.

This work illustrates how simulation can support inclusion not simply at an individual level, but at the level of organisational culture and system relationships.

 Read the article: <https://link.springer.com/article/10.1007/s10389-018-0948-y>

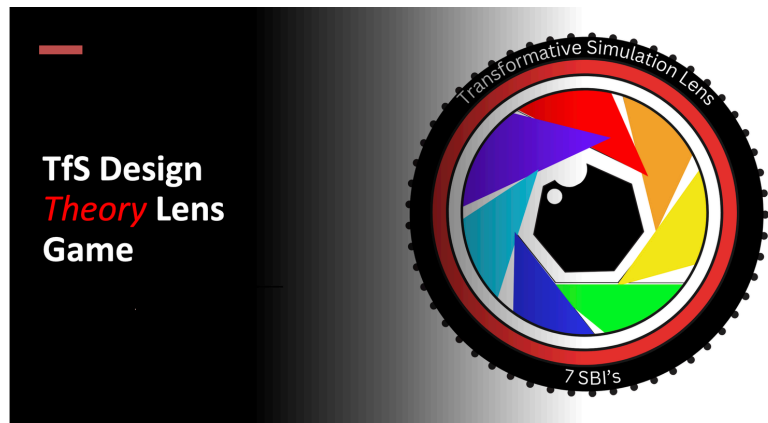
The TfS Design Lens Theory Game

If you want to deepen your understanding of how theory shapes simulation design - or help colleagues and students see how different theoretical perspectives align with the Simulation-Based Intentions (SBIs) - the **TfS Design Lens Theory Game** offers a simple and

engaging way to do it.

Rather than matching practice examples to intentions, this game invites you to pair **theoretical frameworks and models** with the SBI they most closely inform. It encourages you to think about how different traditions – such as quality improvement, human factors, or public and patient engagement – shape what is attended to, how simulations are designed, and what kinds of insight or outcomes are generated.

It's a quick, interactive way to explore the relationship between **theory, intention, and design** – and a practical tool for teaching, facilitation, and developing more intentional, theory-informed simulation practice.



Download the game [here](#)

TfS in Practice Webinar: Guys & St Thomas' NHS Foundation Trust, England

On the 1st May, Colette Laws-Chapman shared how simulation has historically been used across her organisation – often aligning with what is now understood as Transformative Simulation.

Drawing on a range of work, Colette reflected on how simulation has supported patient safety, workforce development, and system learning, and how her approach has evolved from intuitive practice to a more deliberate use of the Transformative Simulation framework, ensuring her approach has become more intentional, ethical and impactful.

The slide features a central title 'Ethics in Transformative Simulation: From Practice to Accountability'. Below the title is a quote: 'Transformative Simulation does not just explore systems — it shapes decisions. Therefore, its ethical strength lies in making those decisions explicit, traceable, and justifiable.' The slide is divided into several sections: 'THE 5 Ps' (Purpose, Perspective, Preparation, Possibility, Probability), 'What are we trying to do — understand, change, test, involve?' (with icons for a lightbulb, bar chart, hand, magnifying glass, and speech bubble), and 'How were decisions generated, explored, and interpreted?' (with a diamond-shaped diagram). A box highlights 'Ethical strength in TfS comes from traceability: decisions are not assumed — they are designed, surfaced, and documented'. A list compares 'Without this' (Hidden assumptions, Selective perspectives, Premature solutions, Unquestioned authority) with 'With TfS' (Explicit purpose, Inclusive perspectives, Justified decisions, Transparent rationale, Embedded in theory & evidence, Shared responsibility). The bottom of the slide includes the text 'we are Caring | Ambitious | Inclusive' and the NIS logo for Guy's and St Thomas' NHS Foundation Trust. On the right side, there is a vertical strip showing a video feed of Colette Laws-Chapman and a grid of participant icons with initials.

If you missed it, [watch the recording here](#)





Tfs in Practice Webinar


Guest Speaker: Phil Gurnett, Senior Resuscitation Practitioner, Kings College Hospital NHS Foundation Trust, England



Exploring how Tfs is already happening within everyday work, often unseen, but highly impactful. Drawing on recent experience within his team, he shows how these practices can be recognised, strengthened and used more intentionally.

 Friday 14 July 2026

 13:00–14:00 UK time

Open to all –  [Tfs in Practice Webinar | Join meeting in Teams | Microsoft Teams](#)



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



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- Interested in joining the **Strategic Group** or being added to the **mailing list**? Email SIGS@aspih.org.uk.
- Our Tfs WhatsApp group [Join here](#)
- Further resources available here: <https://aspih.org.uk/resources/transformative-simulation/>



Thanks for being here. This movement is growing - and it needs your insight, curiosity, and creativity.

**#TransformativeSimulation #Tfs #SimulationForChange
#SystemsChange #ASPiH #CulturalChange #Improvement
#HumanFactors #StaffWellbeing**

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Transformative Simulation in action — shaping systems, culture & practice through intentional, values-based design



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