

Delivering Excellence in Learning Disabilities service – A QI initiative

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Aim:

The aim is to improve knowledge, skills and behaviour of our front line staff working with people with learning disabilities within the inpatient setting. By upskilling our staff through a blended approach involving, teaching, practice development and supervision at the workplace we aim to reduce levels of violence and aggression in the inpatient service within the next year. This project is a priority for the QI strategy for our service.

QSIR tools used

- + Diving Diagram
- + PDSA cycle
- + Process mapping
- + Co- Production

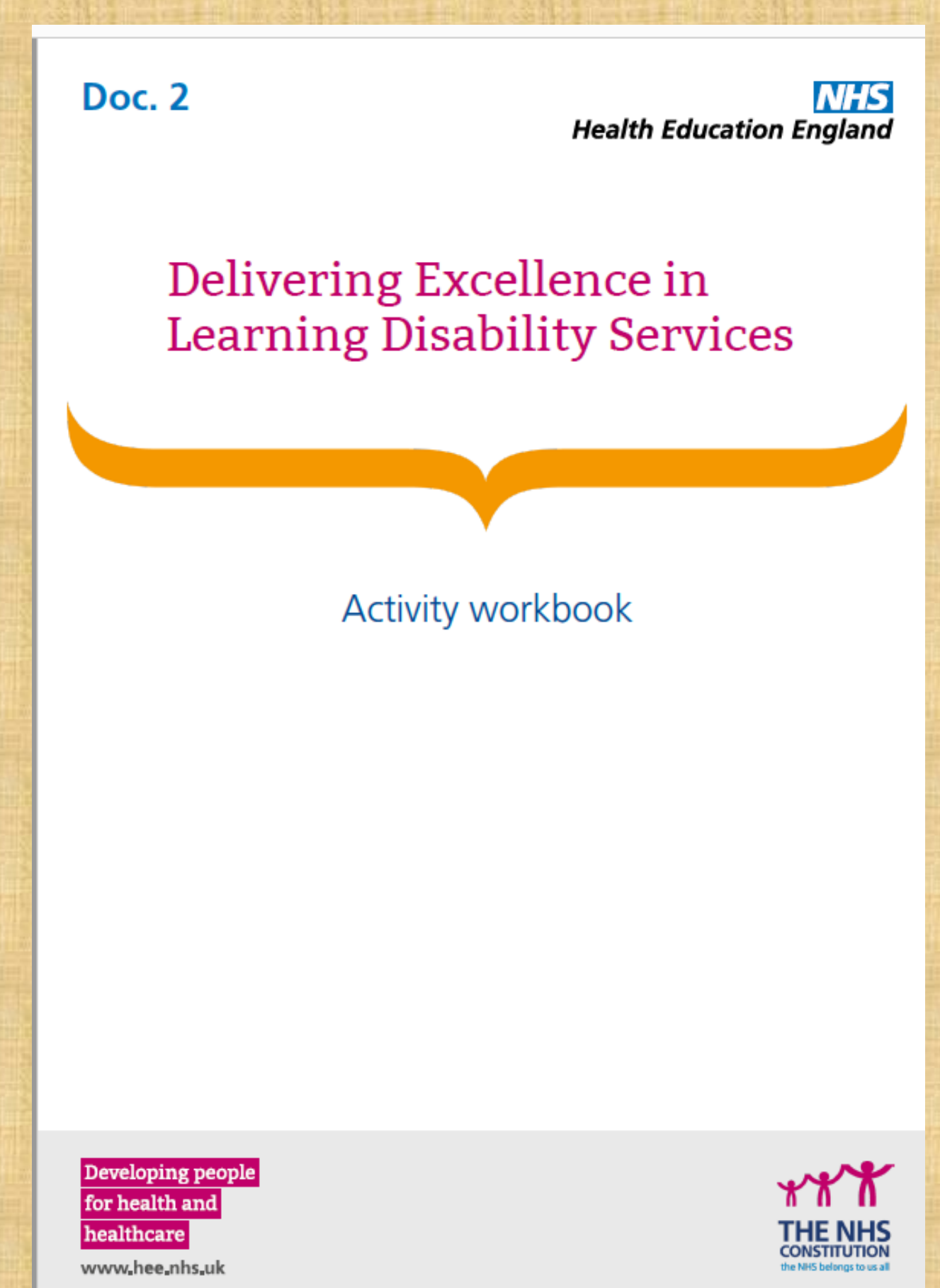
Change ideas tested (PDSA)

Different change ideas were tested throughout the project:

- 1 full day training day on 5 different topics
- 3 follow up mentoring sessions to allow reflection and discussion
- 'Delivering Excellence in LD service' workbook

Methods:

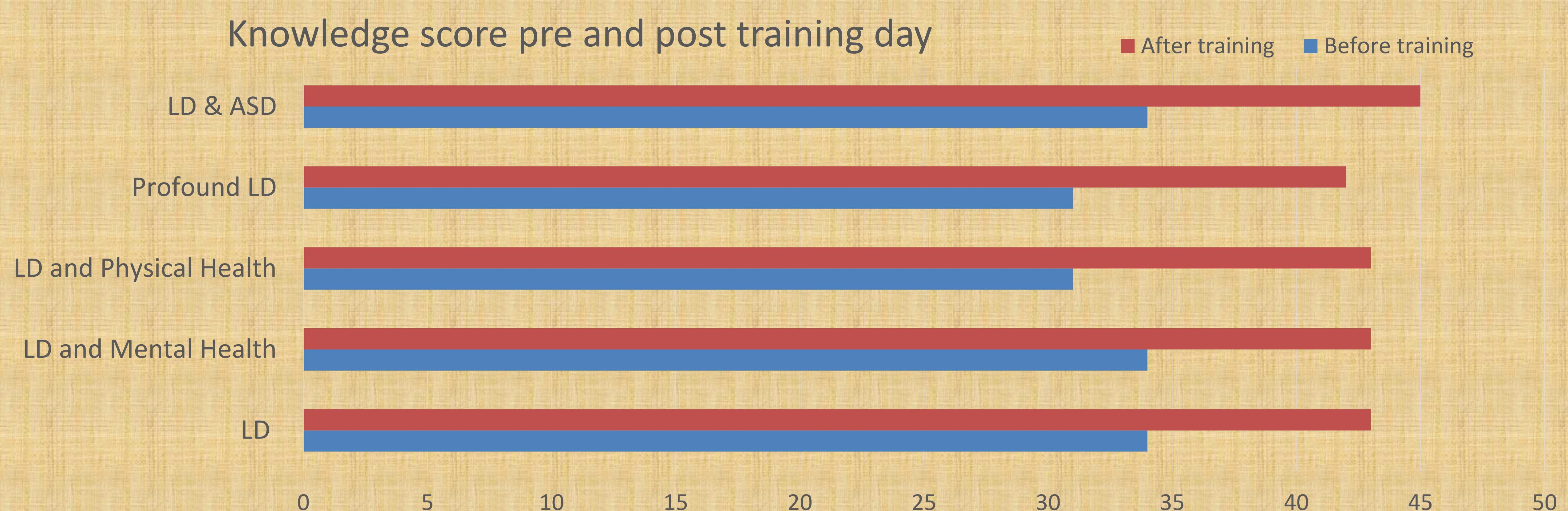
We have utilised the continuous quality improvement methodology and highlighted the project priorities in a driver diagram. It is acknowledged that front line support staff are often unable to access training and development that draw them away from their front-line duties. A collaborative training programme devised by Health Education England called 'Delivering Excellence in Learning Disability services' was implemented following initial consultation with staff. The programme included one full day training and three mentoring sessions carried out by various professionals in the team. The mentoring element of the programme is an exciting new way of working that are believed to improve partnership between MDT and ward staff, as well as better understanding of the treatment plan. Front line staff are encouraged to demonstrate a change in practice which is recorded in a workbook and discussed with their mentor drawn from within the qualified professionals in the ward MDT.



Outcome

10 staff members completed the full day training for Delivering Excellence in LD service. It covered five topics including; learning disabilities, learning disabilities and mental health, learning disabilities and physical health, profound and multiple learning disabilities and learning disabilities and Autism. Over the next three months, 3 small group mentoring sessions are planned. The course content was provided through teaching, reflection, supervision and case discussions.

The training staff members were asked to provide anonymous feedback on each of the sessions from the training. The pre and post training self rated knowledge score are shown below.



Next Steps

Further changes ideas include:

- ✓ Some challenges which include low attendance to the mentoring sessions due to staff sickness, lack of staff on site and rota issues
- ✓ More flexibility will be allowed in the mentoring sessions to allow maximum attendance
- ✓ Next training cycle will be rolled out to other inpatient wards in the hospital