AIMS Rehab Annual Forum
17th of May 2018

A Whole-Team-Approach: Through a Process of Self-Review

The application and implications of a multi-disciplinary quality improvement study

Stephen Jones & Ehab Morgan

Purpose of Todays Presentation

➢ To provide a brief overview of Barefoot Lodge and a summary of the AIMS self-review process;

➢ To explain how we set out to undertake the AIMS self-review as a 'whole-team';

➢ To discuss some of the barriers and facilitators towards implementing *A Whole-Team Approach*;

➢ To present the empirical significance and practice implications of undertaking the AIMS self-review through *A Whole-Team-Approach*.

Barefoot Lodge – *a brief overview of the service*

Barefoot Lodge is an Oxleas NHS FT inpatient mental health open-rehabilitation unit; providing care for up to 15 people with complex mental health needs aged 18 to 65, within the boroughs of Greenwich, Bromley and Bexley.

Underpinned by the recovery approach and in collaboration with service-users, the team at Barefoot Lodge strives to promote all aspects of the individual's life, leading to a hopeful and optimistic future in the community.

The AIMS self-review – *a brief summary*

In brief, the self-review is about measuring your service against the AIMS standards set out in the *Standards for Inpatient Mental Health Rehabilitation Services: Third Edition* (AIMS, 2016)

The standards cover various aspects of service provision, from *care and treatment* to *management and leadership.*

So, how did we go about the self review process?

Many report that 'self-reviews' or 'general improvement projects' have frequently been undertaken in a 'tick box', and/or through a 'top-down' approach.

The Barefoot Team aimed to undertake the self-review in what has been defined by the project lead as a *whole-team approach*:

"*a collaborative effort between all team members to achieve set goals, reflecting on how we deliver our services, identify gaps and make recommendations for improving what we do. The approach is not 'top down' or 'bottom up'; instead it relies on identifying shared responsibilities and the facilitation of collaborative working amongst team members, leading to attaining the aims and objectives of the self-review process*".

Stephen Jones (2017)

A *whole-team approach* intends to provide team members the opportunity to demonstrate individual and team-level innovation through an integrated method of self-review.

Staff were asked what their particular interests were with regards to the four primary AIMS standard areas:

Admission and Discharge;

Care and Treatment;

Service Management;

Physical Environment and Staffing.

Timely and Purposeful Admission;

Care and Treatment – Activities, Medication and Physical Health;

Patient Safety and Recovery;

Patient and Carer Support;

The Environment;

Leadership, Management, Staff and Culture;

Project Graphics and Presentation.

Timely and Purposeful Admission
(Staff Nurse - Group leader)
1 x Staff Nurse, 2 x HCAs,1 x Consultant Psychiatrist, 1 x Administrator

Care and Treatment – Activities, Medication and Physical Health
(Staff Nurse - Group leader)
2 x Staff Nurses, 2 x HCAs, 1 x Consultant Psychiatrist, 1 x Consultant Clinical Psychologist, 1 x Clinical Psychologist, 1 x OT

Patient Safety and Recovery
(Charge Nurse - Group leader)
Unit Manager, 2 x HCAs, 1 x Staff Nurse

Patient and Carer Support
(HCA - Group leader)
2 x HCAs, 1 x Staff Nurse

The Environment
(Staff Nurse - Group leader)
1 x Staff Nurse, 3 x HCAs,

Leadership, Management, Staff and Culture
(Unit Manager - Group leader)
2 x Charge Nurses, 1 x Consultant Psychiatrist

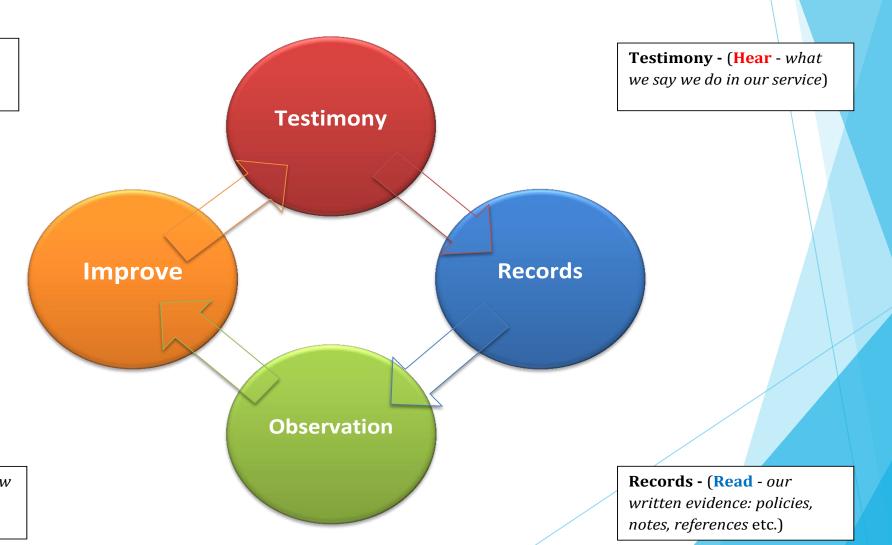**Project Graphics and Presentation**
(HCA - Group leader)
2 x HCAs

Each group leader adopted different leadership styles, but in all, group members took pride and active participation in a *whole-team approach*.

To assist each group to undertake the self-review in a thorough and systematic manner, a template of the standards was devised to reflect the processes outlined by the **T**R**O**I Cycle.

The TROI Cycle was formed as a visual representation of the method for *how* we reviewed our service. It is based on the idea of *triangulation* - a validity method applied by both the AIMS Network and CQC.

The TROI Cycle of Self-Review

Improve - (*What can we do to better evidence and improve our services?*)

Testimony - (**Hear** - *what we say we do in our service*)

Testimony

Improve

Records

Observation

Observation - (**See** - *how we show what we do to others*)

Records - (**Read** - *our written evidence: policies, notes, references* etc.)

By engaging in the *whole-team approach* towards the AIMS self-review, as a team, we identified key areas where we could improve – in the short, medium and long term.

Perceived challenges and fears before implementing a whole-team approach

Can I rely on other people with different skills and backgrounds to carry out the self-review as I would have done it?

Will this lead to endless and unnecessary conflicts of ideas?

Will this diverse approach impact on the service successfully achieving accreditation?

Challenges during the implementation of the approach during the self-review

Dissolving leadership responsibilities, sharing the balance of power and an unconventional way of thinking…

Trusting other less experienced colleagues to lead us.

Being available to offer time to support sub teams.

My leadership role within the implementation of a whole-team approach

I would describe my leadership as clinical one; I welcomed ideas of different interventions and ways of doing things, raised by all colleagues.

Thinking untraditionally to achieve agreed objectives and galvanizing optimism for success, while always maintaining patients' safety.

What sort of things I did differently to support and embed the approach within the team

It was difficult to give up leadership to other people particularly with a task such as AIMS and more difficult was not to express my anxiety.

I managed this by observing team members' motivation and meet with the co-leaders more frequently having endless discussions about the concept.

I felt more rewarded to have helped others' personally and professionally develop through this process.

Engagement leads to success

❖ Improved/changed the work atmosphere from doing what we know to explore a better ways to do it: from routine and repetitive to stimulating and interesting;

❖ Added a personal feel to the place of work;

❖ Led to less demands on my time;

❖ Enhanced problem solving skills;

❖ the team has become more cohesive, comprehensive, complementary to each member, confident and able to share a laugh.

In one sentence - what are the key points leaders should consider if adopting a *whole-team approach*?

Be less focused on oneself, contain staff anxiety, trust each other and be positive.

What have been the implications of undertaking the AIMS self-review through *a whole-team approach?*

The Research Question

How does undertaking the AIMS self-review through a *whole-team-approach* influence staff member's views of: *self* within the team, *teamwork* within the team and *leadership* within the team?

Methods

Semi-structured questionnaire consisting of 8 statements, using a 5-point Likert scale.

Questionnaire was completed by participants (n = 20) before the self-review and by the same participants after the self-review (approximately 3 months apart).

Statistical Findings

Undertaking the AIMS self-review through a whole-team-approach significantly improved participant's views of *teamwork* and *leadership* within the team.

On average, there was an improvement in participant's views of *self* within the team, but the difference was not statistically significant.

Implications for Practice

Participants of this study reported that undertaking the AIMS self-review through a whole-team approach has:

❖ Increased their knowledge & skills, feelings of being valued, and confidence to share ideas within the team;

❖ Enriched working relationships, collaboration, and consistency across the team;

❖ Improved job satisfaction, individual ownership, and shared responsibility of work;

❖ Assisted with developing innovative ideas, and helped service-users to achieve their goals.

Limitations

Findings are not generalisable to the wider population, they are representative of the participants within this study;

Future investigations would seek to study a wider cohort of staff across a number of practice sites;

It would be of interest to see the impact of a *whole-team-approach* when undertaking other types of service-reviews or quality improvement initiatives (other than AIMS).

Questions?

Scan the QR code below to follow this study on
ResearchGate

Follow Stephen on *Twitter*

 @SWJ_1