

Our Journey... Getting Traction... Spreading the Message...





Local & service wide

Get the buy in at the beginning!!!

How we embedded it and made it stick:

- Being repetitive
- Believing in the ideals
- Part of everyday conversations
- Involving all levels of MDT in project team

Assessment level

• Added to information given at gate keeping level





Local & service wide

Spreading it throughout the rest of our service

- Using QI methodology to extend work to whole service (6 Medium secure & 3 Low secure wards)
- Brought on Service Quality & Performance Lead
- Use tools from Reducing Restrictive Practise (*RRP*) Programme on other wards
- Present at influential service meeting (*senior clinicians team meeting*)
- Cluster working (acute cluster roll out & sharing practice)
- Making a commitment for Bradley to be pilot area





Trust & Board Level

Director of Nursing appointed as Trust Sponsor

• Local exposure in Trust

Become key members of Trust RRP Board

- Using RRP Project to influence Trust Board
- Intended roll out of safety cross across whole Trust





Trust & Board Level

Presented RRP project at Trust Listening into Action (LIA) Event

- Attended by professionals across trust, including senior members of the Trust
- Explaining aims and ideas
- Example SU XX = powerful message

Presented to the Trust Board of Directors and Executives

- Provide clear info & message to non clinicians
- Help gain resources
- Gained buy in at the top level of the Trust





Regional buy In

Presenting regionally

- Allied Health & Academic Science Event South of England NHS
- Creating Safer Services and Maintaining Joy in our Work Developing Resilience in Psychiatry – RCPsych Annual Conference

Link in with other regional MSU's and PICU's

- **Devon New PICU** (Approached at presentation we gave visited to share practice on RRP both ways)
- Langdon MSU (R.E: One of our PDSA's Structured 7 Day activity)
- AWP & Somerset PICU's

