



Change idea:

OPEN DOOR ENGAGEMENT

Predictions

- Improvement in patient engagement in meaningful activities.
- Minimise social isolation and social neglect.
- Improvement in patient mood and motivation.
- Reduction in violence and aggression.
- Improvement in patient/staff relationships.

Plan

- Trialled on 6x Long Term Segregation (LTS) patients and 1x patient who is non LTS but is high risk of social isolation.
- 3x patients allocated for the morning shift & 4x patients allocated for the afternoon shift.
- Staffing allocations based on good rapport.
- Patients to be offered 30 minutes of open door engagement a day. Activities of the patients choice to be offered.
- To be documented on RIO by staff member completing the activity.

Do

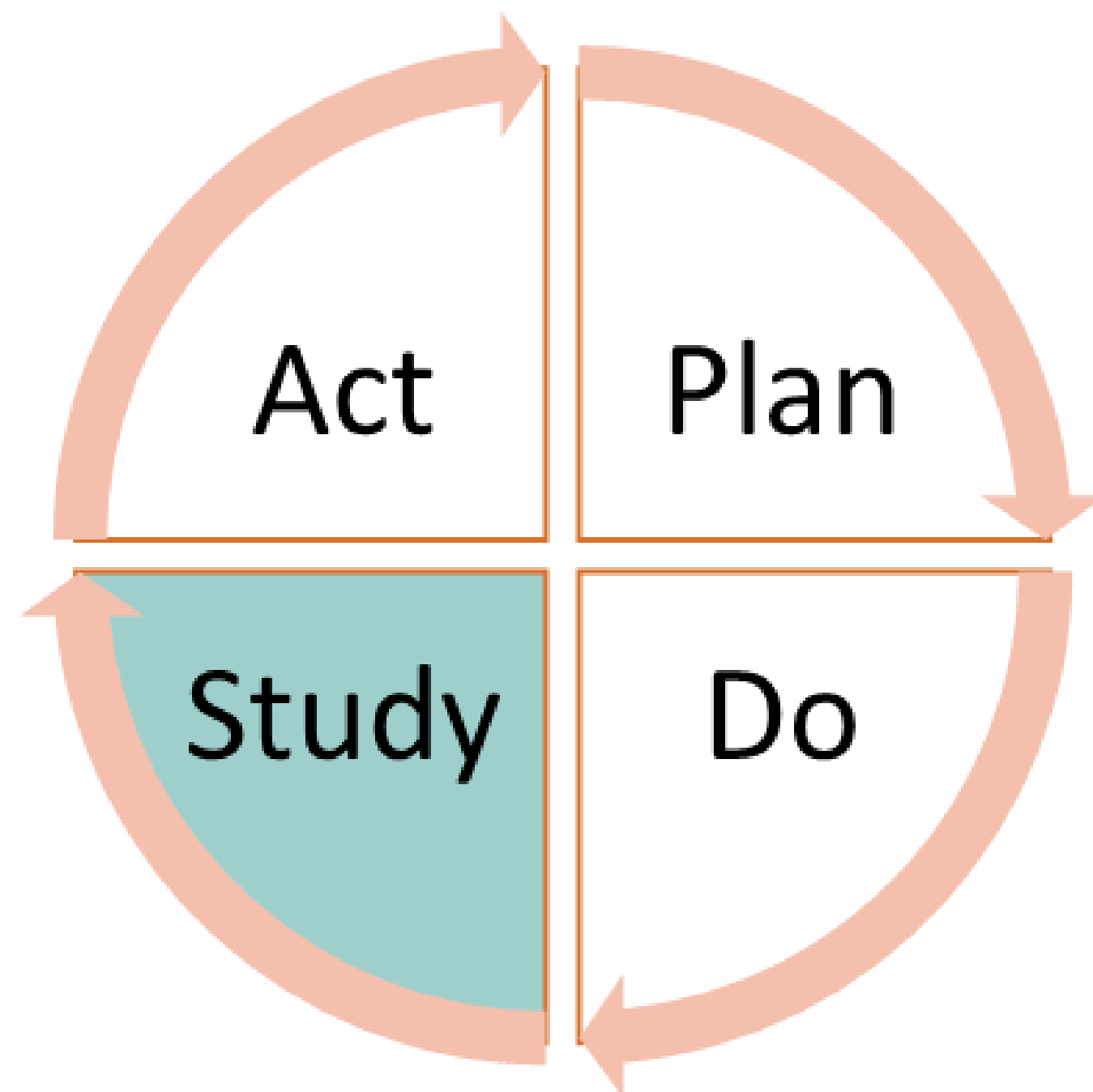
- Allocated each shift by nurse in charge
- Staff completed thorough risk assessment prior to offering session to ensure safety.
- Staff offered patients activity of their choice. Patients were the allocated 30 minutes to engage in the activity with staff member.

WHAT HAPPENED?

- Substantial increase in meaningful engagement with patients on long term segregation.
- Improvement in staff confidence and positive interaction with high risk patients.
- Increased amount of association hours for patients on LTS.
- Improvement in mood for patients

Act

- To be rolled out for all patients on the ward. The team feel that this will positively impact on a decrease in the incidents of violence and aggression if patients are engaged in meaningful activities throughout the day.
- To find a formal method of measurement of effectiveness, rather than relying on only staff observations.



Study

POSITIVES

- Staff were able to positively interact and engage with high risk patients.
- Offering more meaningful activities.
- Staff increase in confidence when working with high risk patients (this was not a predicted outcome, but has made a positive impact on quality patient care)

NEGATIVES

- No formal method of measurement to determine effectiveness and impact on reducing restrictive practice.

All teach, all learn

- Improvement in reducing social isolation and social neglect.
- Positive and meaningful interactions and engagement with high risk patients.
- Better engagement could lead to the reduction of violence and aggression therefore reduce restrictive practices.

