



Nostell ward



Reducing restrictive practice collaborative





South West
Yorkshire Partnership
NHS Foundation Trust



With **all of us** in mind.

An Introduction to Nostell

- Located in Wakefield (West Yorkshire)
- 22 to 28 bed female acute ward
- Purpose-built new unit (2018)
- Staffing – 3 RMN, 4 HCA (LD) 2 RMN, 3HCA (N)
- Average length of stay – 35 days
- Service users – variety of presentations and diagnosis



Incidents of restrictive practice before the collaborative

August 2017 – August 2018

- Restraint – Average 15 incidents per month
- Seclusion – Average 3 incidents per month
- Rapid Tranquilisation – Average 3 incidents per month



On average 21 incidents of restrictive practice per month

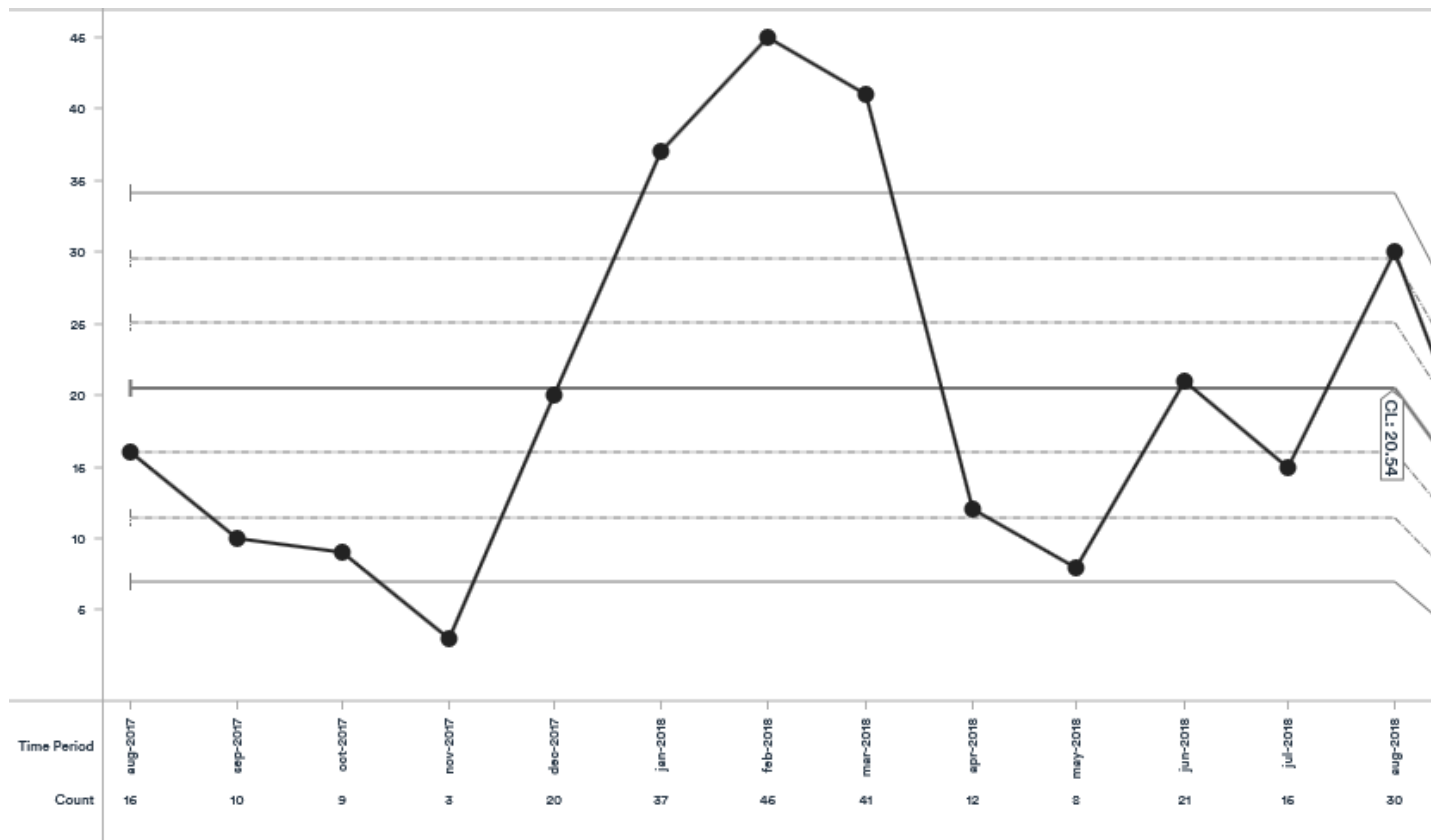
Coupled with high numbers of close observations, daily incidents of self-harm and high rates of staff burnout.

Incidents of restrictive practice before the collaborative

August 2017 – Aug 2018



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Some of our change ideas...

- 24/7 access to lounge and warm drinks
- Extending service user leave access to 21:00hrs
- Unrestricted access to relaxation room and quiet lounge
- Collaborative self-harm care planning
- Protected 1:1 engagement
- Increased nurse-led activities
- Visits from pet therapy dog “Timmy”
- Wall of recovery – messages of hope



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PDSA Cycle – 1hr Protected Time



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NHS Reducing Restrictive Practice QI Collaborative

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Nostell, Female Acute, SWYT,
Claire Wilkinson, Steph Gibson, James Waplington

Q IMPROVING MENTAL HEALTH SAFETY
Reducing restrictive practice

Change idea: 1 Hour Protected Time for Service Users Each Day


Predictions	Plan	Do
<ul style="list-style-type: none">- Increased engagement with SU's- More time for co-production- Staff feeling able to offer uninterrupted time	<ul style="list-style-type: none">- 10:30 – 11:30am everyday- All nursing staff visible and available on the ward- "Close Down" nursing office- Ward Clerk manages phone calls, takes message etc.	<ul style="list-style-type: none">- Increased 1:1 engagement- Increased group activity- Positive feedback from service users- Not always happening consistently

Act Plan
Study Do

Study	Act
<ul style="list-style-type: none">- Service users welcomed it "I LOVE getting guaranteed time with staff"- Increased 1:1 time recorded in clinical records- Staff sometimes found committing to it a challenge due to other clinical pressures/demands	<ul style="list-style-type: none">- Shift co-ordinator stays in office during protected time to free other staff to engage in it- Future introduction of "Happy to Help" lanyards to identify available staff throughout the day

All teach, all learn

- Very popular amongst service users, all found it helpful & supportive
- Simple changes can have the biggest impact
- Supports staff to break away from the operational issues and focus on quality service user engagement



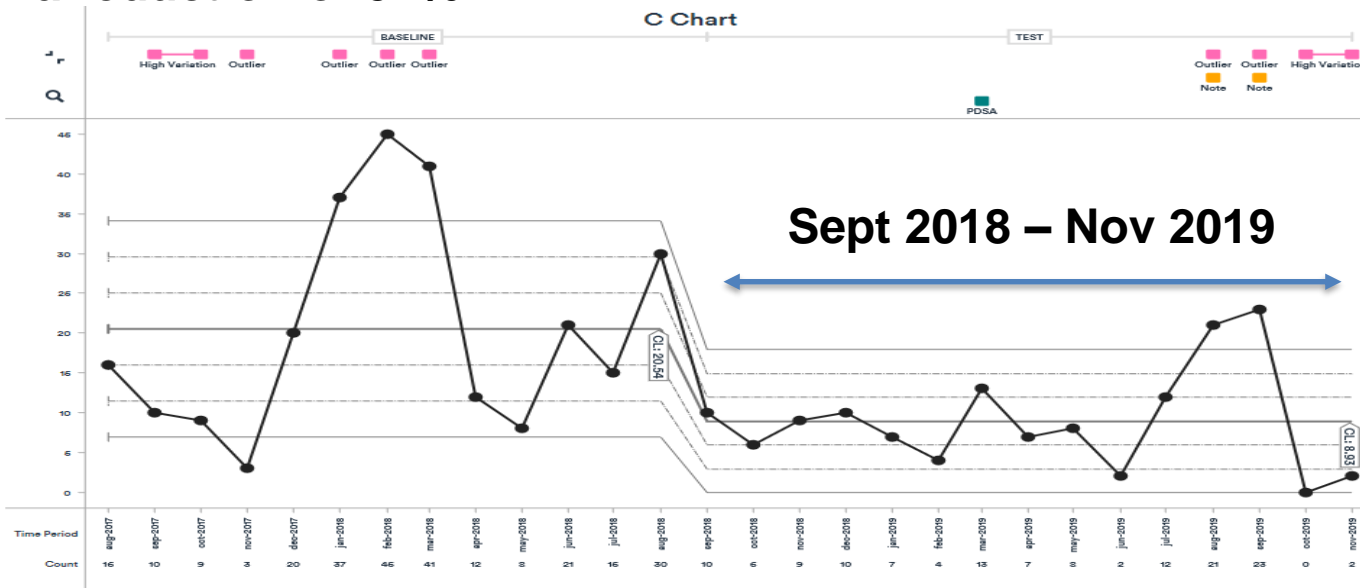
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Our RRPI Journey Aug 2018 – Nov 2019

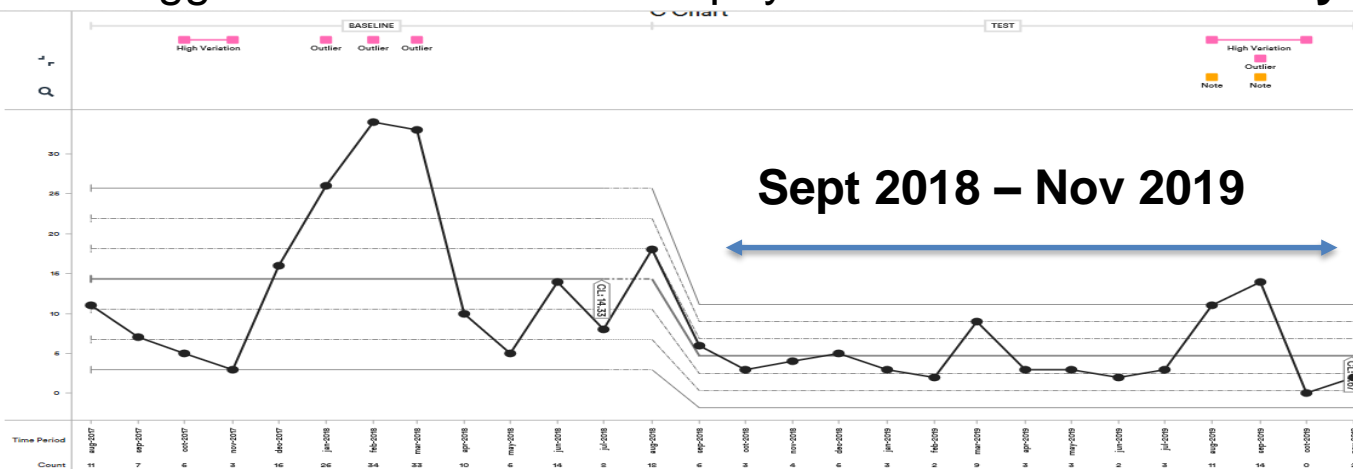


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- On average 9 incidents of restrictive practice per month – a reduction of **57%**



- Our biggest reduction has been physical restraints – down by **67%**



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Benefits and improvements

- Empowered staff and service users
- Changes from bottom up
- Culture change – proactive not reactive
- Review of “ward rules”
- Calmer ward environment
- More time to care
- Reduced staff stress and burnout
- Happier service users and staff



With **all of us** in mind.

What does the future hold?

- Edition Research Study (University of Manchester)
- De-escalation skills training
- Boxing equipment
- Service user environmental audit
- Service user led welcome committee
- Service user designed “Insiders Guide”





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