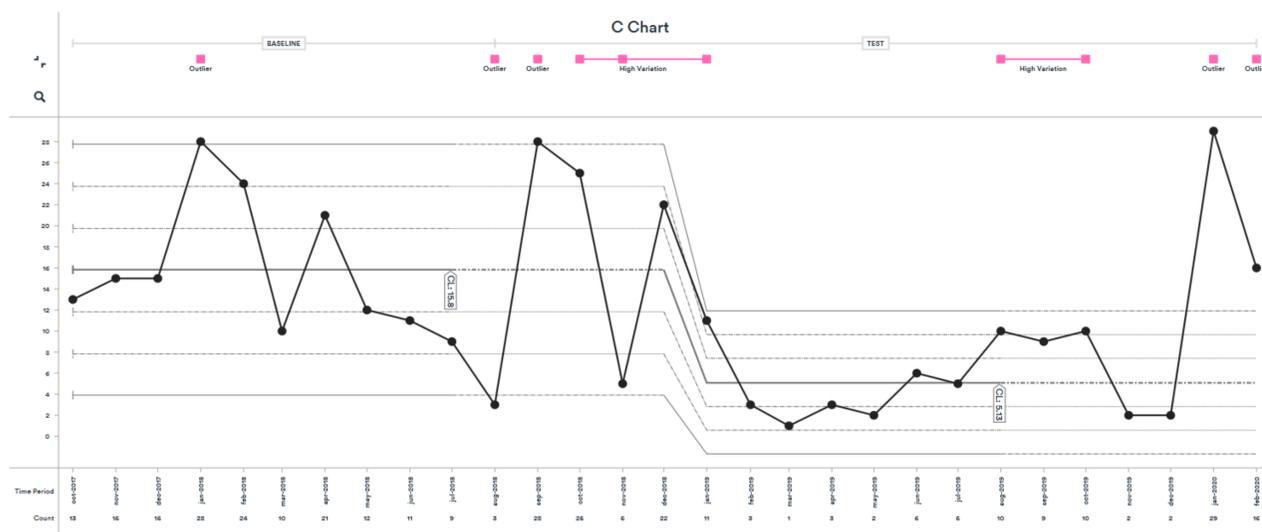


Reducing Restrictive Practice QI Collaborative

Reflecting on our project

Our data



Fraser team (L-R): Peter Haddow, Paul Moody, Gemma Dobey, Joanne Watson, Danielle Bibby and John Callendar

Change ideas we have tested include:

- Menstrual Recording – Using safety cross data we were able to establish a pattern of incidents at particular times of the month for a particular young person. We implemented menstrual recording charts in attempts to predict changes in presentation and implement strategies to reduce incidents. **This was successful!**

- Vehicle Availability – By increasing the pool of vehicles available to each ward within the hospital, patients now have the opportunity to utilise these to meet their needs in terms of appointments and social integration as well as Section 7 leave or home visits. **This was successful!**

- Open Office Door – To enable more consistency and availability of staff, we implemented an open office door ethos for both the Nursing Office and the Managers Office. This visual cue enabled patients to know when staff were available and when they were not. Patients feedback was that they preferred the open door as they knew if they could or couldn't interrupt. **This was successful!**

What our patients, staff and carers say

Feedback about the project has been predominantly positive. The project team has been transparent with everyone involved in patient care on Fraser House and have negotiated and taken on board all ideas and feedback.

Patients have enjoyed being empowered in the changes on the ward, as have the Nursing Assistants who have driven all of the change ideas amazingly



Young Person on Fraser House



Young Person on Fraser House

The Project Team within Fraser House would like to thank all of the RRP team who have been an immense support throughout the project! You have supported us to make a huge difference to our patient experience and we will be forever grateful!

Changes we have seen on the ward

The culture within the ward has changed a lot during the project. Nursing Assistants have been given autonomy within their role to implement changes in liaison with management rather than the other way around.

There has been a significant reduction in restrictive practices, only seeing increases during inappropriate admissions until initial assessments have been completed.

In general, Fraser House excels itself on being a “homely” atmosphere. Staff do not wear uniforms and work in a very relaxed manner with patients. Patients are encouraged to support staff with day to day tasks as a way of breaking down barriers between roles.

Though we have no patients within the clinical area who were here from the start of the project, integration between peer groups has enabled the ethos of patients creating change ideas to remain pertinent to the culture of the ward.

Due to recent changes within the trust, Ferndene Hospital has been impacted greatly. Due to the autonomy being given to floor staff, moral has remained stable. Staff feel empowered within their role and their confidence has grown as a hole which positively impacts the patients.

Looking to the future

Moving foreword, Fraser House will keep the culture it has embodied within the ward, floor staff and patients will continue to be promoted to identify and establish changes throughout the ward. They will be the key indicators as to whether things are “working” or “not working.”

Fraser will continue to monitor incidents of restrictive interventions in a similar way to the safety cross.

We have dates arranged to share our experience of the project throughout our trust, providing advice and guidance to ward who wish to implement similar changes.