

REDUCING RESTRICTIVE PRACTICE

NEWSLETTER MAY 2019

We're six months into this quality improvement collaborative, aimed at reducing the use of restrictive practice by 30% by April 2020. We've been inspired by the amazing ideas being tested across all the wards, and we hope you've enjoyed the two-monthly learning sessions focused on sharing learning. You can find all the materials and presentations on our website page here.

We'd encourage you to keep updating your data on LifeQI at the end of each month, as we're starting to see signs of improvement across many wards now (including two featured below in this newsletter!) Please focus your energy on testing ideas and learning how these work in your setting. We look forward to seeing you at our next learning session in July, and in the meantime do use the hashtag #MHSIP to share and connect on Twitter...

Best wishes, Amar

Care Plans

Irwell Ward - Greater Manchester Mental Health NHS FT

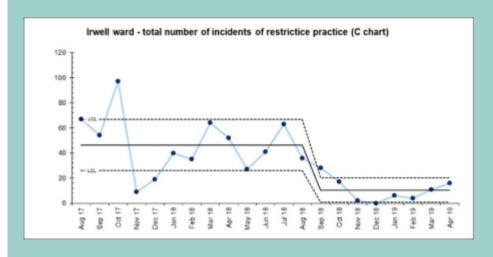
Irwell Ward recently received a transfer from their male acute ward of a young gentleman who was being restrained following an incident of attempted AWOL. The decision to restrain and nurse this patient in seclusion was made due to the risk posed to other patients and nursing staff.

Initially this patient did not engage with nursing staff, however over time we worked extensively with him using the 'Getting To Know You' information and devising a collaborative care plan to meet his needs and manage the risks posed. The patient self-identified that he had issues controlling his anger and violence towards others, and at times the only means of managing this safely would be for him to be nursed in isolation.

This patient identified that being touched, restrained or given medication under restraint would cause him more distress and increase his risk of violence and aggression. He asked that nursing staff do not touch him and allow him to take himself into the de-stimulation room and/or seclusion. He stated that it would be more detrimental for him if he was given medication under restraint as this had caused him trauma initially on admission. We established that when he was agitated and unable to manage his own risks, the best way to communicate his need to use the de-stim or seclusion room was using flash cards and his identified phrases.

A care plan for using the de-stim room or seclusion was created collaboratively with the patient and nursing staff. We believe working with this patient and respecting his wishes has enabled us to nurse him in a safer manner and has allowed us to build up therapeutic relationships with him.

Lianne Holland (Deputy Ward Manager)



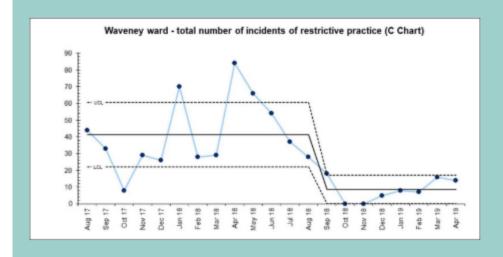
Waveney Ward - Norfolk and Suffolk NHS FT

Waveney Ward recently presented some brilliant work they have been doing with care planning at the learning set discussion group on May 13th. They have been successfully testing a <u>new care plan template</u> which is completed at the end of each ward review. The template is for guidance, but ultimately the service user decides what goes into their care plan, resulting in something truly personalised.

The medic leaves the meeting for half an hour and the care plan is completed with the service user and any family or carers who are there. This enables everyone to contribute, and any concerns about ward rounds can be addressed immediately.

This approach has felt more manageable to the team and has seen some fantastic outcomes for service users. Feedback from service users and carers has been excellent and Waveney ward have seen a sustained reduction in the use of restrictive practice.

If you would like to know anymore, please get in touch with your coach.

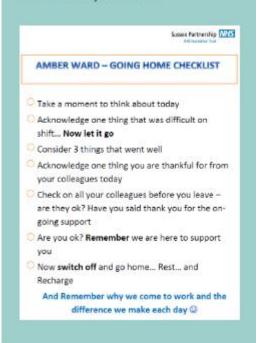


Tools and Resources

Going Home Checklist

Amber Ward at Sussex Partnership NHS FT have been using a Going Home Checklist to support staff wellbeing at the end of a shift.

Why not <u>download the checklist</u> on our website and see if this makes a different on your ward?



Charlie the Positive Chicken

Lilacs Ward at South West London and St Georges NHS Trust have been sharing thanks and appreciation through the new addition to their team, Charlie the Chicken.

A 'feelgood friday' roundup of the good news is a great way to end the week and to build staff morale.





STAR WARDS

LOADS OF PRACTICAL IDEAS FOR IMPROVING THE DAILY EXPERIENCES AND TREATMENT OUTCOMES OF MENTAL HEALTH INPATIENTS

Star Wards was founded by Marion Janner OBE after she spent time on a mental health ward. She created a list of 65 things that would have made her life there happier. There are now hundreds of Star Wards ideas and schemes. Ideas are based on enabling a warmly therapeutic experience for patients on inpatient wards. Just a few of these ideas are listed below:

REGULAR COMEDY EVENINGS
DECENT WARD LIBRARY
HALF HOUR OF EXERCISE EACH DAY
WARD EXERCISE BIKE
FLEXIBLE VISITING HOURS
PETS VISITING

DESIGNATED STAFF MEMBER WITH CARE PLANNING REMIT

PERSONAL RECOVERY FILE
OPTION OF 1 HOUR OF THERAPY A DAY FOR EVERY
PATIENT

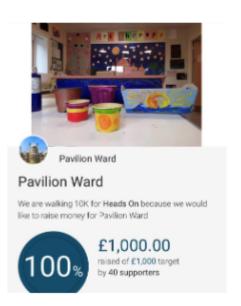
PLACEMENTS FOR STUDENT COUNSELLORS
BUDDY SYSTEM
RECREATION BUDGET THAT PATIENTS DECIDE ON

NO MORE QUEUING FOR MEDICATION
PATIENTS DO DAILY SELF REVIEW

More ideas and resources can be found on the Star Wards website www.starwards.org.uk

News and Events

Congratulations to **Pavilion Ward** at Sussex Partnership NHS FT on raising £1000 for a therapeutic garden for service users through a sponsored walk!



Bradley Brook Ward at Avon and Wiltshire Mental Health Partnership NHS FT have recently received a letter from their Trust Board thanking them for their hard work and commitment to the Reducing Restrictive Practice programme. It's brilliant to see this ward's hard work being recognised and we look forward to seeing what Bradley Brook do next.





