

Change story: Challenging ‘Unwritten Rules’ – Oak Ward

Programme aim:

- To reduce restrictive practice by 25% in mental health, learning disabilities and autism inpatient services by testing and scaling the reducing restrictive practice [change package](#)

What problem were you trying to solve?

- The ward team were aware that a number of ‘unwritten rules’ had been established or evolved over time and these could often be the source of frustration for patients and lead to flashpoints.

What did you do?

- The ward team embarked on a process of engaging with staff and patients to both identify and challenge these ‘unwritten rules’.
- Once a rule was identified, it was discussed between staff and patients with a view to either “bin, tweak or keep”, subject to requirements around health and safety.

How did it go?

- Through this process, 13 ‘unwritten rules’ were identified, including bans on certain items, such as caffeinated drinks and restriction on certain activities, such as using the microwave or showering during the night.
- It was agreed that some restrictions had to be kept due to health and safety or legal requirement, such as no CBD drinks or no family allowed on the ward. However, the majority of rules discussed were either overturned or at least adjusted. For example, it was recognised that some medications induce sweating therefore showering in the night is not unreasonable.

What did you learn?

- Where possible, avoid bans and blanket restrictions as patients will find it hard to accept a rule with no clear rationale.
- Even where a rule or restriction cannot be lifted, openly discussing the rationale for them with patients is beneficial and can increase the likelihood of acceptance.