AMBER WARD'S JOURNEY....

By Gemma Rose and Stephanie Jones
LIFE ON AMBER WARD 18 MONTHS AGO...

• Blanket rules in place e.g. belts/ shoelaces removed from everyone, no mobile phones allowed on the ward
  • Staff feeling tired, frustrated and burnt out leading to high sickness rates
• Frequent use of restrictive interventions such as patients being on enhanced observations
  • No regular communication/ contact with carers
  • Lack of engagement or regular activities/ groups on the ward
    • High use of bank/ agency staff
  • Lack of development opportunities, supervision or support
    • High rates of incidents on the ward
  • “Doing things because we have always done it that way”
UNTAPPED POTENTIAL...

1. 100 Service leaders (wards and day hospital) with a HUGE amount of expertise, skills and creativity...
2. Many of who came with Carers who also had a HUGE amount of expertise, skills and creativity and dedication to their loved ones
3. Staff who were INCREDIBLY caring and eager to develop as professionals including HCA’s with background degrees in psychology
4. Peer support workers with lived experiences

There were AMAZING resources in place but people needed to be empowered and equipped to lead the service forward
HOW WAS THIS DONE...

• Change in leadership/management style across the hospital - Leader leader model introduced including ward managers/matrons doing shifts in numbers

• A vision was created together as a team and everyone had ownership of this

• Staff were given the skills and development opportunities they needed in order to reach the vision. E.g. development programs for each band, learning for lessons forum and protected time to learn

• Platforms were implemented for people to be heard such as away days, regular team meetings, supervisions and safety huddles

• A transparent and open environment was created with our service leaders, involving them in discussions around safety, restrictive practices and ways to improve our service

• Replaced guilt and blame with curiosity, and learning to fail rather than failing to learn

• Sharing and stealing good practice on social media
Changes implemented...

- No more blanket bans e.g. service leaders allowed mobile phones risk assessments carried out on individuals property
- More activities, groups and therapeutic engagement- some of our groups are service leader led
  - Carer’s support lead
  - Safety huddles
- Introduction of ELM Brossett scale to help with the decision making process for the use of seclusion
- Post incident debriefs carried out with staff after each incident
- A focus on improving our performance, such as supervision rates, training etc.
  - Weekly community meeting with service leaders
  - Introduction of ‘hub watch’ to promote sexual safety
  - Letter of care introduced
LIFE ON AMBER WARD TODAY...

- An exciting feeling on the ward and as a feeling of openness and transparency with our service leaders
- Staff are invested in, feel valued and empowered, leading to better care provided to our service leaders
- Person centred care is provided and our service leaders are at the heart of all our practices
- Passionate and innovative team with a focus on reducing restrictive practices
  - Monthly supervision rates of 100% for last 16 months
  - Higher staff retention rates and a reduction in sickness rates
  - Regular team away days - we aim for every 3-6 months
  - Quality improvement embedded into what we do
    - Open door policy
  - MDT huddles including nurse, manager and HCA
    - 72 hour carer contact
WHERE NEXT...

- Focus on post-incident debriefs with service leaders
  - Bitesize training sessions on verbal de-escalation from the PMVA team to help improve staffs confidence
- Get a service leader on board to help with the QI project
  - Employ an OTA for the ward
- End of shift huddles for staff and going home checklist
- Reflective practice sessions for the team fortnightly
- Improvement of the ward environment - refurb in place
THANK YOU FOR LISTENING 😊

ANY QUESTIONS?