THE Productive Times

SPECIAL REHABILITATION AND RECOVERY EDITION

Smarter handovers improve quality

The new system was introduced at Rotherham Doncaster and South Humber Mental Health NHS Foundation Trust's Swallownest Court as part of the Handover module of The Productive Mental Health Ward programme, which was led by nurse Connie Ngwenya.

Staff questionnaires revealed staff thought that the handover had little value and service users didn't like the minimal amount of staff on the ward. The handover was moved to a smaller room and has far fewer interruptions.

Staff not participating in the handover, fill out a log sheet for their service users, which are taken into the handover by a shift coordinator, as identified by the duty rota.

Connie said: "The difficulty with the traditional system was that a lot more staff were included in the handover and there was minimal staff on the ward, we also used to hold the handovers in the ward office and there would be interruptions and information could be missed out".

"I received good support in the work I was doing. As I was a newly qualified staff nurse at the time, there was a risk that everyone would be asking 'who does she think she is?'

But now everybody loves the new system," she added.

The new system was evaluated eight weeks later and the clinical team found service users did feel safer during the handover process as more staff were on the ward and staff had

more time to spend with the service users. Every shift now has all staff allocated to service users so one to one time has also dramatically increased.

Caroline Boot, Support Worker said "It means we are not sitting through a long handover anymore and we can spend that time on the ward. I have got more time now, there are

more staff around at certain times, so I can now plan one to one time with service users taking them out from the ward as part of their individual Rehabilitation Care Planning Programmes.

Modern Matron, Michaela Power said "Handover is a really key part of service delivery; it's about discussing care and

care plans and it was a very positive process module to complete first."

We have not shortened the handover in respect of time, but we have increased the quality of what is being discussed during that time. Handover is more prepared now, with people going in with the information that is required.

Breaking down the barriers at Swallownest Court

A bespoke admission and discharge process developed between the rehabilitation and acute wards to speed up the process is helping to dispel myths and build closer working relationships.

The average length of stay at Swallownest Court is 12 – 18 months, with a discharge and admission rate of around two a month.

The work that has been undertaken in the admission and discharge module, particularly the process mapping exercise that was held with acute services, has strengthened relations between the services and improved communication.

Rob Gore deputy ward manager, who led the work on the discharge and admission module of The Productive Mental Health Ward said; " The admission and discharge module was quite a big one and we had five staff in the team, including a support worker and staff nurses. In the past we have not always had a good relationship with the acute wards because of a lot of historical systems that were institutionalised".

"We held a process mapping meeting with staff from the acute wards and we looked at what happens during the admission process and mapped it out" he said. "They would send us a referral and we would arrange to assess the patient but this could take a few weeks, now the referrals come direct to the Modern Matron who e-mails the respective ward manager to confirm receipt of the referral and then liaises with the RMO and ward staff to arrange an assessment. The review of this process alone can shorten the waiting period for an assessment by two to four weeks.

Rob said: "It's easy to think service users will be here for six months or more, so we should not consider discharge until later after admission, but many go into supported accommodation and this can have a long waiting list, so the earlier we can start the discharge planning process the better".

Rachel Millard, practice development modern matron said: "The most positive thing to come out of this module is the relationships with acute wards and working more in partnership with them."

Michaela Power, modern matron said "This is better for the service users as they are assessed for the most appropriate place as quickly as possible".

Caroline Boot, support worker agreed it was helping them prepare their service users better for "life" after discharge. She said: "Now when a place has come up for a service user they are ready to move much more quickly and we can help them in this preparation."

£100 a month saved on wasted meals

Staff at Swallownest Court have cut their food bill by £100 a month – just by reducing wastage.

As a rehabilitation ward, many service users are encouraged to cook for themselves and can be out of the ward during meal times. However, the team were still able to adapt the meals module of The Productive Mental Health Ward to improve quality and make financial savings in relation to wastage.

Modern matron, Michaela Power said: "We have a mixture of service users admitted onto the ward, some eat in the dining room whilst others cook meals for themselves, so we adapted the meals module to look at the wastage".

The ward began by analysing how the food was ordered and how much wastage there was. Historically food was ordered several days ahead. The measuring provided evidence that the food was being routinely over-ordered and gave the ward the confidence to change their ordering practices. Food wastage has now been reduced even further each month and work is ongoing regarding wastage.

# "Up and out": service users compete for safety crosses

A touch of friendly competition among service users is helping them to increase therapeutic interventions. This innovative use of the "safety cross" has been implemented at Ruby Lodge.

As part of their therapy service users are encouraged to get up in the morning and undertake therapy programmes however, their mental health problems can make it difficult to get up and get motivated. Staff have adapted the safety cross tool from The Productive Mental Health Ward to record service users who are ready for engagement at 10.00am in a morning.

Rachel Millard, practice development modern matron and clinical lead for The Productive Mental Health Ward, said: "Ruby Lodge have quite a lot of young men, and there is a bit of a competitive environment, so we have developed a programme around that, by using safety crosses to indicate service users who get up before 10.00am. If they are all up they will colour the safety cross in green".

"It's a really creative use of the safety crosses and is also therapeutic for the service users, and has increased engagement".

RUBY/EMERALD LODGE
UP BEFORE 10:00

Month: JUNE 2009

100 percent

Less than 50

More than 50
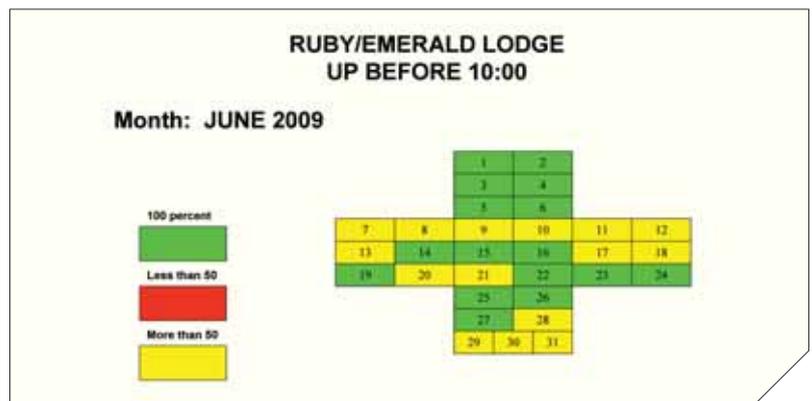
Patient Status at a Glance reveal real improvements

"The Patient Status at a Glance module involved staff in the redesign of the patient information boards that are located in the ward office," said Sue Halder, ward manager.

This included information that was felt to be most useful. Early versions were created on paper, once the information was agreed it went onto a white board. One of the most successful areas is the 'special instructions' column which highlights care changes, for example, a new risk management plan.

Rob Gore, deputy ward manager, has noticed the difference the board has made to his working day. "I don't get asked so many questions anymore" he said, "I don't get interrupted so much either. I can get on with the work I need to do, I also think things are more planned now we have more pertinent information on view"

Caroline Boot, support worker, said: "now we have information readily available people are not waiting around to find something out or being interrupted. Service users have got a lot more out of it because more time is focused on their care"

60 seconds with...

practice development modern matron and lead facilitator for The Productive Mental Health Ward

How has The Productive Mental Health Ward benefited your organisation?

The programme is making some great changes to the way we work and has been an incredibly empowering experience for staff.

There was also a very strong expectation that this was going to happen from the Board of Directors which is really important. When the Board of Directors reports name a staff nurse who has led a module and effected changes it is really empowering for staff. Our Chief Executive came onto the ward recently and that's given it a really high profile.

Do the modules suit a Rehabilitation and Recovery setting?

The modules may seem acute-focused, but they are easily adaptable and can be adjusted for your own clinical environment. The Productive Series is very clinically focused and enables staff to be engaged in the review of their clinical environment and empowers them to implement changes and lean methodologies.

How important are measures to the programme?

The measures have been a real enabler. Staff are used to filling in a form or pressing a button on a computer and that's it. They don't know where the information goes or what it is used for, but now they are using that information to influence and drive change.

For example, the well organised ward module began with a series of one hour "activity follow" exercises. Seven hours in total were completed and involved "following" a different staff member for one hour, recording exactly every minute what activity they were undertaking, with the aim being to record how much direct care time was spent with the service users.

The outcome indicated that there was 48% direct care. This was excellent as an initial baseline and more activity follow exercises are to be scheduled for the future, these will compare difference grades of staff.

Dear team leader…

Did it feel a bit daunting in the beginning?

The hardest part is always going to be finding the time and getting staff on board. We did the Handover module first, which couldn't have given us a better start to the process modules. It demonstrated that anybody could pick up the handbook and understand a module.

The module also marked a turning point when all staff got on board, after seeing the positive difference it made to their working day, and to the time they could spend with their service users.

Nurses are not mathematicians and there seems to be a lot of measuring and auditing involved

The measures provide evidence and this is the best way to change practices and to prove it is working. It enables nurses to analyse clinical issues rather than to do things because that is how it has always been done. It has helped give us the confidence to make better, more radical changes. The measuring isn't prescriptive and can reflect individual ward priorities, for example, we have looked at our untoward incidents and thought about how we measure them.

We have been rigorous from the beginning; the challenge is to measure and display the information quickly. We have adhered to timescales for staff to lead modules and defined clear areas of responsibility.

Does it really make a difference?

Yes. There's a real buzz about the place and everything feels much better. The Productive Mental Health Ward has allowed people to be more creative. We have done "dot voting", a specific visual aid tool to gain service users views, by asking specific questions. We are always trying to find different ways of seeking service users' opinions about the way we deliver care.

Releasing time for service user activities

Service users and staff at Swallownest Court are investing some of the time they have released through The Productive Mental Health Ward into organised activities.

Activities have always taken place on the ward, but have been adhoc when staff have had the time to plan and deliver them.

Now a weekly schedule of activities has been established, including a range of events designed to engage service users, improve their health and wellbeing, and develop relationships.

Activities so far have included pool tournaments, pampering nights, bingo, health and well-being session, making fruit smoothies, Wii fit etc.

The events have been so successful that the team is now looking to create an activities coordinator role, who can deliver a programme of events for service users as part of their individual care plans/ therapy.

Staff Nurse, Connie Ngwenga runs weekly pampering sessions. She said: "We started doing some ward activities three months ago and this has now developed into a weekly schedule of activities.

"We asked what activities people wanted and have introduced them. The service users are motivated and will come and watch, take part, or even suggest a different activity.

"The activities are excellent for therapeutic intervention".