

Reducing Restrictive Practice Monet Ward, ARD

Caroline Okworu, Ward Manager, Monet Ward

Insert Contact Details of lead/project team

Team Members

Caroline Okworo - Ward Manager

Chipo Chaya – Deputy Ward Manager

James Addison – Clinical Lead

Elena Martinez Bragulat – Assistant Psychologist

Keri Dowsett – Medical Secretary

Margaret Ramma – Support Worker

Terry Mullen – Support Worker

Nicole Sewell - Modern Matron



Rationale

Restrictive practices can be seen throughout our practice. Types of restrictive practices include chemical restraint, environmental restraint, mechanical restraint and physical restraint.

The therapeutic relationship between the patient and staff can become poor, with a subsequent increase in incidents and complaints.

In 2021 Monet Ward commenced a Quality Improvement project, with an aim to treat patients safely and lawfully maximising their independence and improve the patient journey when admitted to the ward.

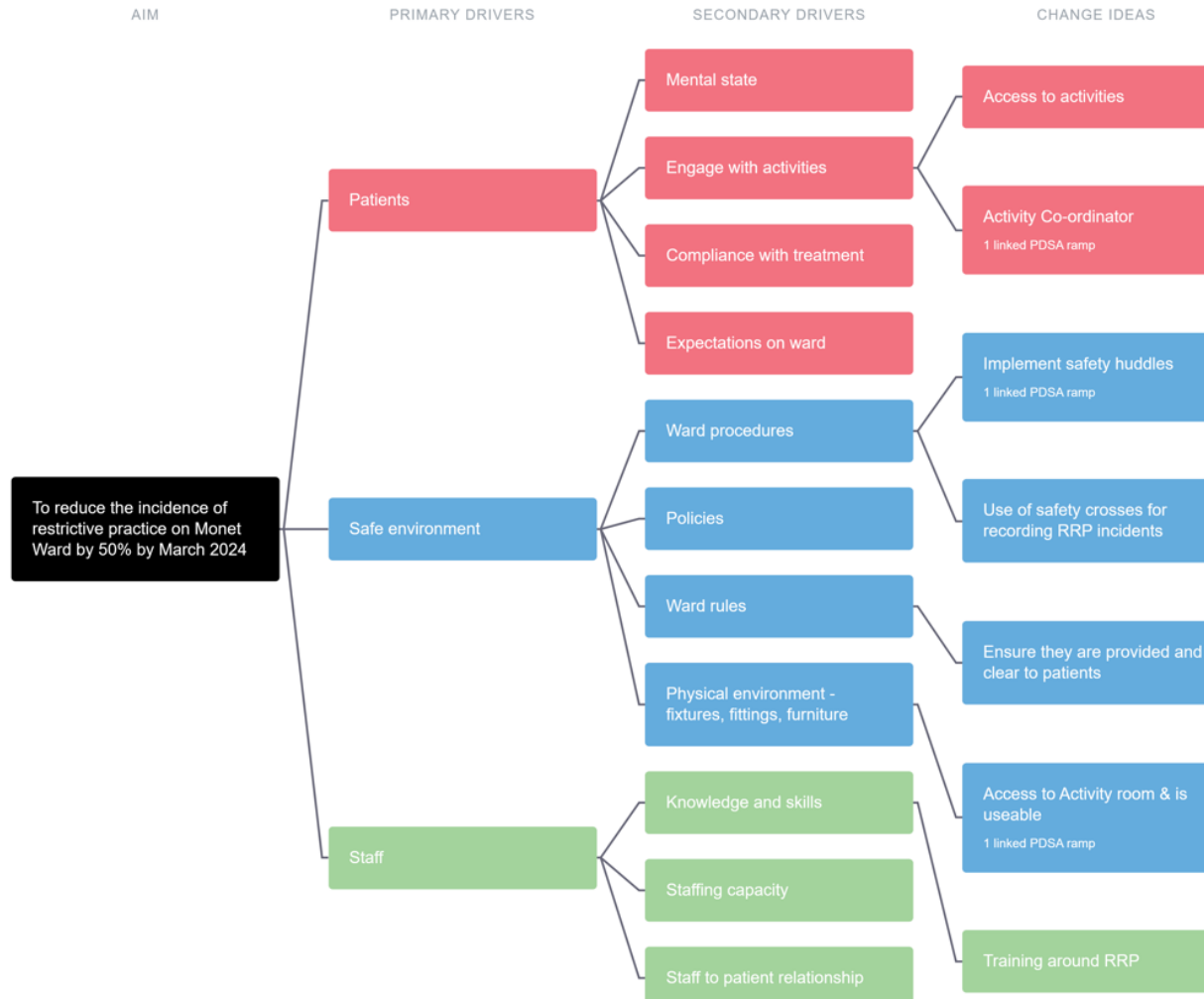


Project Aim

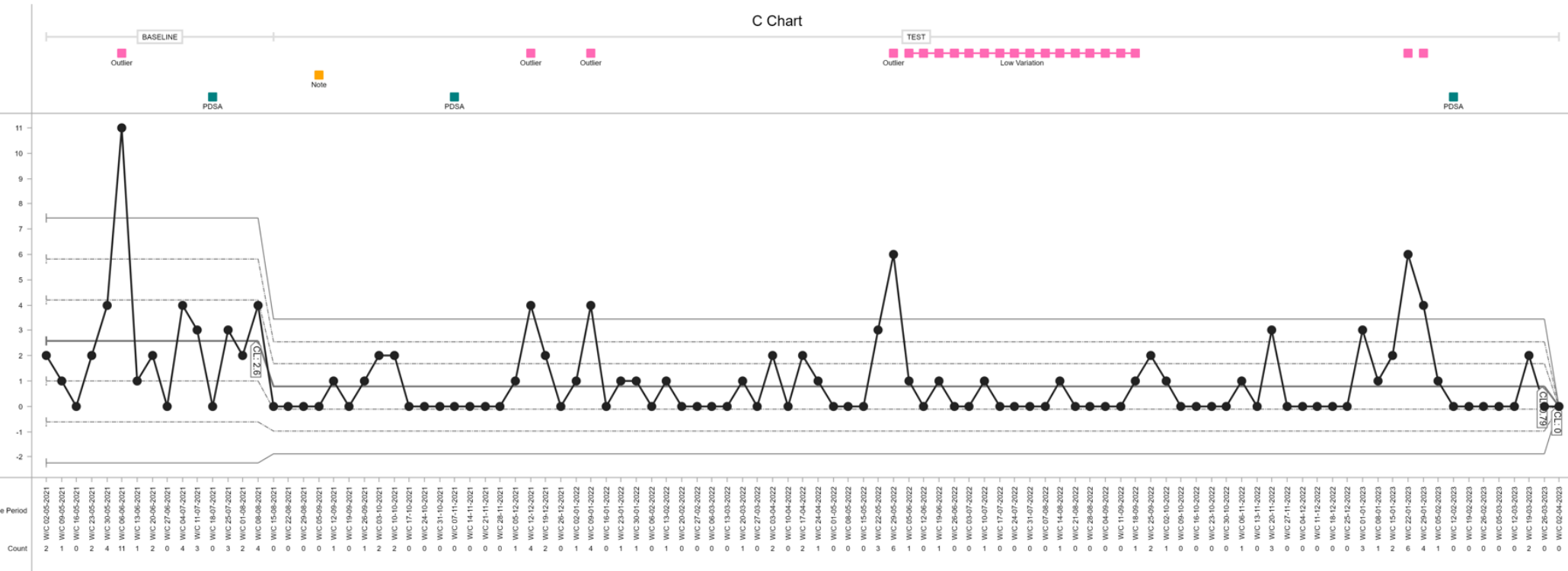
To reduce the incidence of restrictive practice on Monet Ward by 50% by March 2024



Driver Diagram



Data/Results



Generated by **eLifeQI**



Successes

- Monet Ward became an accredited member of the Quality Network for the Royal College of Psychiatry in 2022.
- Reduced referrals to PICU.
- Reduction in restraints.
- **Daily Safety Huddles** to highlight risks and discuss proactive approaches
- **Zonal Observations**, to allow staff to be proactive and observant and visible for the patients.
- Safewards, **Mutual help meetings**
- Weekly **Debrief Meetings** to learn from incidents.
- **Case Conferences** for the ward to be aware of patients who present with behaviours that challenge and reduce incidents.
- Staff assigned to the activity room, continual use of the **activity room**, no time table for the use.
- Work inline with the See Think Act model- Aware of **Relational security** and the patient mix.

Challenges

1. Ward not having control over who is admitted to the ward and the patient mix becoming unsettled.
2. Maintaining staffing levels to ensure activities and zonal observations are sustained can be a challenge due to staff sickness and staff vacancies.
3. Consistency ensuring all staff follow through with the ward ethos.
4. Changing the ward culture and sustaining it with new staff and.





Lessons Learned

What have you learned about this process as a team?

1. There is no “I” in team
2. Continuous communication between all parties.

What advice would your team give to colleagues who may want to follow suit and implement your project for their service?

1. Constant communication with the staff and patients
2. Constant feedback from patients and ensuring there are forums for patients to talk.
3. Ensure all staff are part of the planning when introducing new initiatives.
4. Include all staff at all levels from all disciplines
5. Co production with patients when introducing new initiatives



Next Steps

- **The challenges are ongoing and there are occasions when a challenging patient mix can change the dynamics on the ward.**
- **Monet Ward has recently become a default ward for patients with a mild learning disability therefore there are new challenges for the team.**
- **Multiple training modules have been commissioned by the Clinical Commissioning Group to enhance staff knowledge on behaviours that challenge ASD and learning disabilities.**
- **A sensory room is being built on Monet Ward for patients with sensory needs or simply a quiet place to relax.**
- **Better partnership with the Senior Leadership team when challenges evolve.**

Impact

- **Improved communication with patients. Patients who were previously admitted to the ward have noted a change in activities and better therapeutic relationships with staff.**
- **Improved knowledge and understanding of patients and patient group.**
- **Better understanding of proactive strategies.**
- **Boundaries between the different disciplines has reduced as all staff are encouraged to attend the Safety Huddles and Debrief Meetings and be part of the discussion about patient safety.**
- **Improved patient experience, due to more activities and forums to communicate**
- **Improved staff wellbeing, due to less incidents involving staff.**