

What is the aim of your project?



Increase the facilitation of groups during unsocial hours
and improve patients engagement in structured activities and their
experience of groups by 50% by June 2015



Improve patient engagement

Increase the facilitation of groups during unsocial hours and improve patients engagement in structured activities and their experience of groups by 50% by June 2015

Reduce incidence of violence through reducing boredom

Tailor activities to patient individual needs to increase participation

Engage patients in meaningful ward activities & reduce boredom

Meet basic needs
By formulating individual weekly activity programme

Patient education on the positive benefit of interventions

Increase activities facilitated at weekends

Improve inter ward activities between Broadgate & Ludgate

Monthly Monitoring of incidence of violence
Monthly monitoring of the impact of increased activities at weekends on the levels of physical and verbal aggression

Collaborative working between patient, Primary nurse and OT to formulate individual weekly activities planner which feeds into the care plan
Routine feedback of individual patient engagement in groups at ward rounds and on RIO

Increase the number of activities facilitated on and off Broadgate and Ludgate wards
Increase inter ward group facilitation
Weekly patient activity planner to be routinely discussed at the ward round
Increase groups facilitated out of hours, after 6pm and at weekends
Target hard to engage patients for activities

What are you currently testing?



Data

What is the process measure?

- Patient satisfaction with engagement in groups and activities measured through feedback questionnaires
- We also measure the attendance to groups
- We are now collecting feedback data using tablets because they are more user friendly

Who is collecting?

Broadgate and Ludgate QI fellows

How is this fed back?

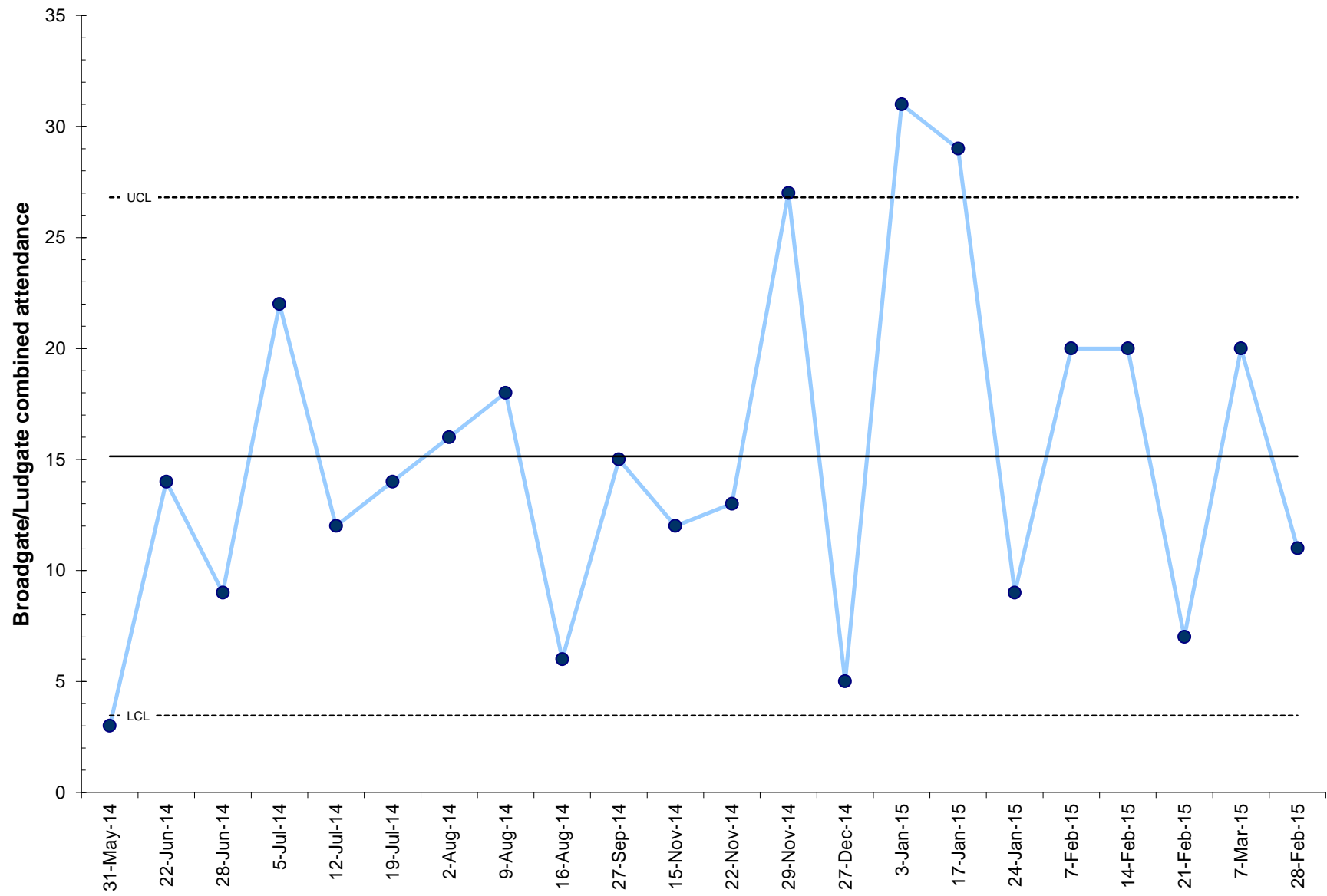
PDSA weekly meetings

Patients community meetings

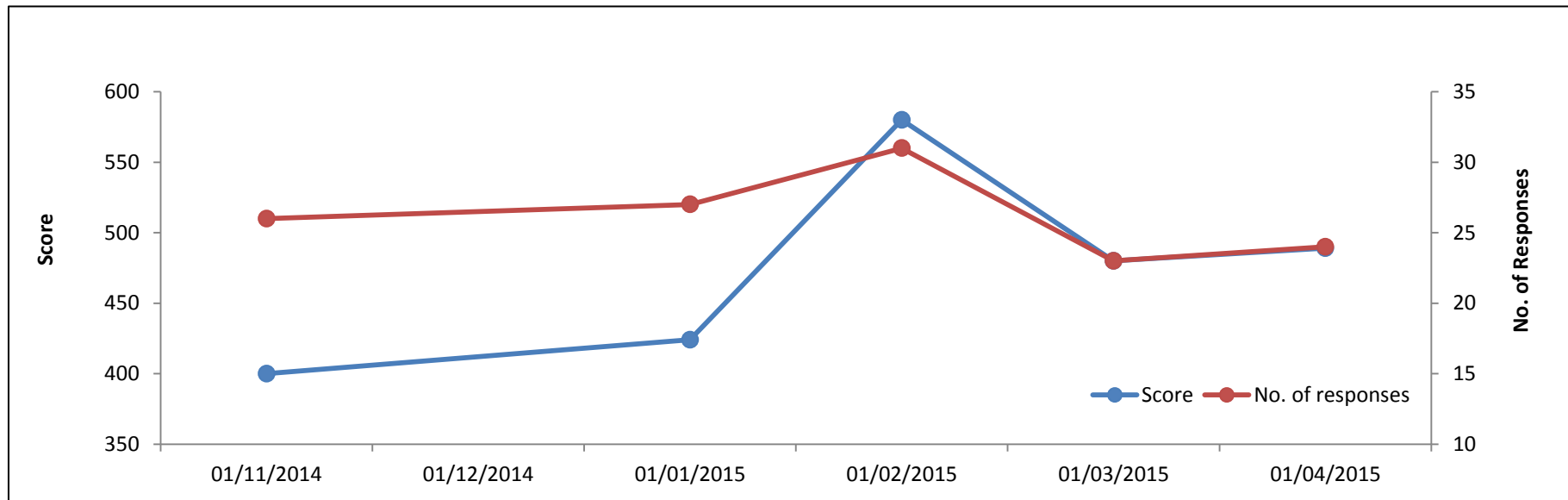
Team Away Days

Monthly forensic QI forum

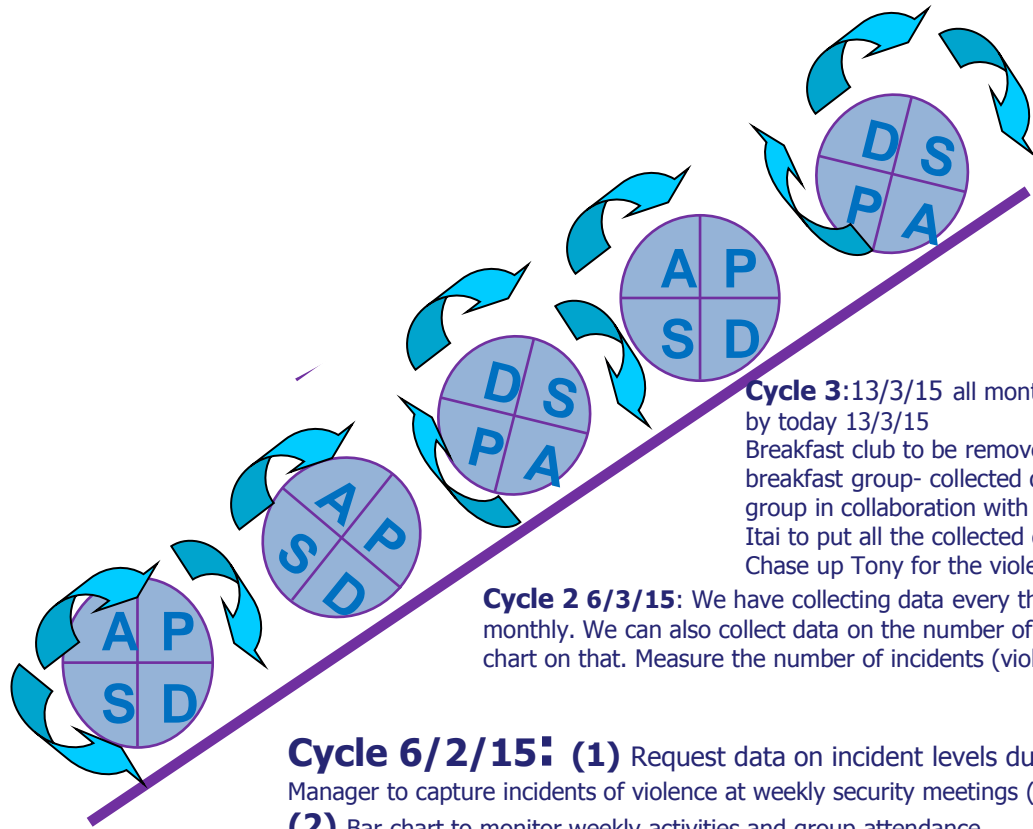
C Chart



Increasing facilitation of Groups During Unsocial hours & Improving patients engagements



Activities



Cycle 5:

Cycle 4:

Cycle 3: 13/3/15 all monthly feedback questionnaires for February to be submitted by today 13/3/15
Breakfast club to be removed as an activity, we need to change it to a healthy eating breakfast group- collected data to be removed- Teams to think about starting this new group in collaboration with the patients
Itai to put all the collected data in some meaningful table and sent for analysis to Forid
Chase up Tony for the violence and aggression data . Staff to input attendance data(K)

Cycle 2 6/3/15: We have collecting data every three months but we need to increase the frequency to monthly. We can also collect data on the number of patients attending groups each weekend and create a run chart on that. Measure the number of incidents (violence & aggression) over the weekend on a weekly basis

Cycle 6/2/15: (1) Request data on incident levels during unsocial hours over the last six months.

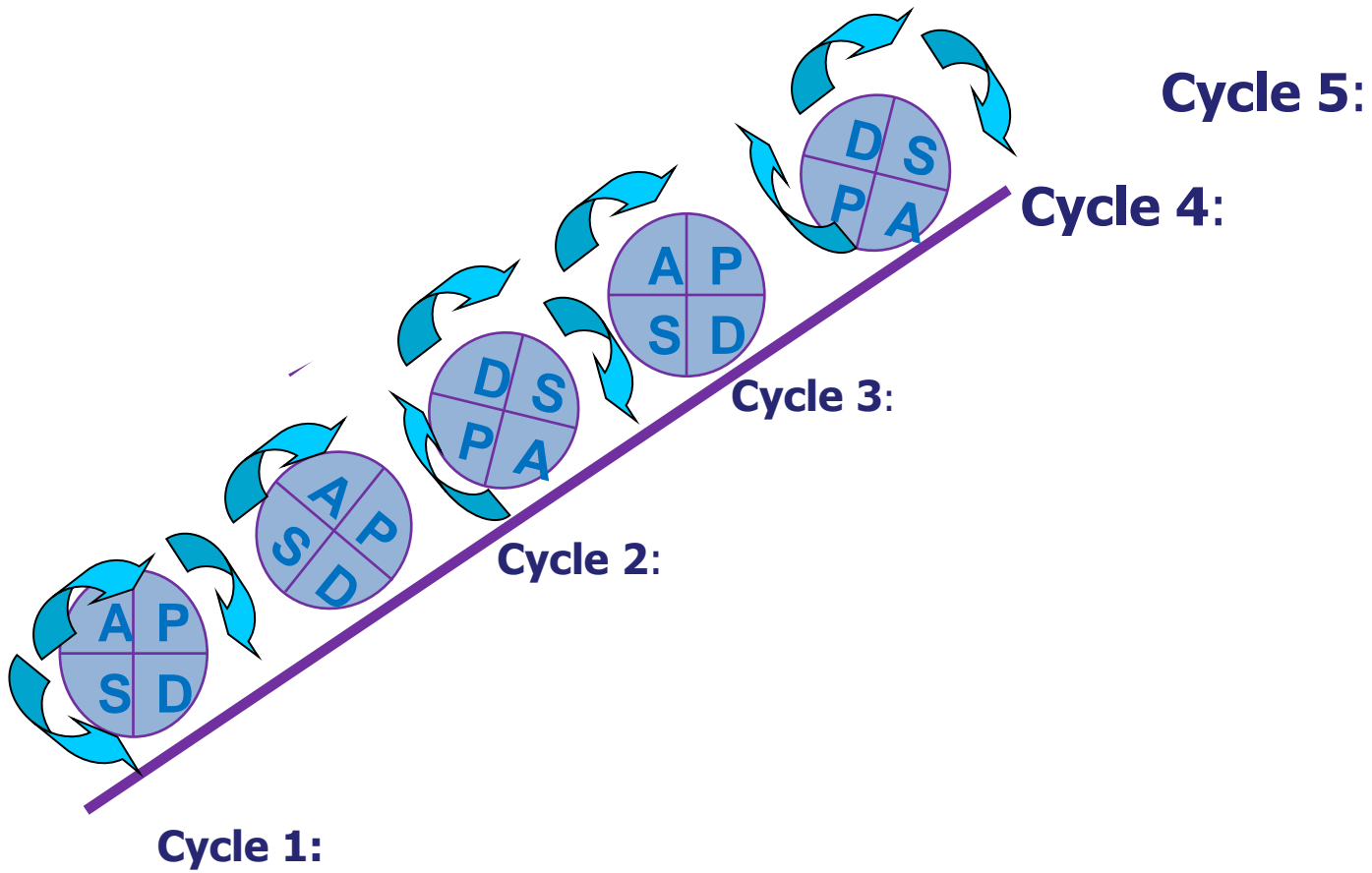
Manager to capture incidents of violence at weekly security meetings (TK) to design a graph

(2) Bar chart to monitor weekly activities and group attendance

(3) Look at outside (community) group activities for patients with Sec 17 leave (JP AND GM)

(4) Capture patients who never attend groups

(5) Bring all feedback information to the meeting for analysis



What is working well in the project?

Better stakeholder engagement i.e. patients and staff

Regular weekly PDSA meetings taking place

Measurement has started, other areas of measurement coming up e.g. incidents trends (awaiting data from incidents reporting)

Trends are showing in terms popularity of activities & groups

Areas on improvement being highlighted

Teams getting more creative in terms of activities and groups to run

Feedback Questionnaires demonstrating a rise in satisfaction levels but a run chart will demonstrate this once we have more data points

What challenges are you facing?

Project not probably progressing at the rate expected by other stakeholders

Balancing creativity and security constraints

Staff turnover affects the continuity of projects

What Next?

Data collection in terms of impact on reported incidents of violence and aggression to analyse for trends.

These trends might not be conclusive but it will be interesting to see if the engagement of patients in activities and groups has had an impact