

TOWER HAMLETS VIOLENCE REDUCTION COLLABORATIVE LEA WARD

Safety Huddles PDSA - Prediction, action-focus and the transfer of learning between shifts

PROJECT TEAM - ADELAIDE ADEMAN, SHABABAZ BEGUM, CLAYTON WALROND & THE BROADER TEAM ON LEA WARD
 QI SPONSOR – ANDY CRUICKSHANK, QI COACH - JEN TAYLOR-WATT (QI LEAD)

Introduction

Lea Ward is part of the Tower Hamlets Violence Reduction Collaborative, 4 acute admissions wards and 2 PICUs, which have been working together since September 2014 to reduce incidents of violence.

Reducing violence and developing a culture of safety has a huge impact in terms of the experience of service users, staff and relatives; making people feel safer and happier to be on the ward. This also has positive knock on benefits in terms of people's recovery, as well as service issues, such as reducing staff sickness and improving retention rates.

Lea Ward has already seen a 50% reduction in violence since we started the project. We are now aiming to reduce violence by another 40% by the end of 2016.

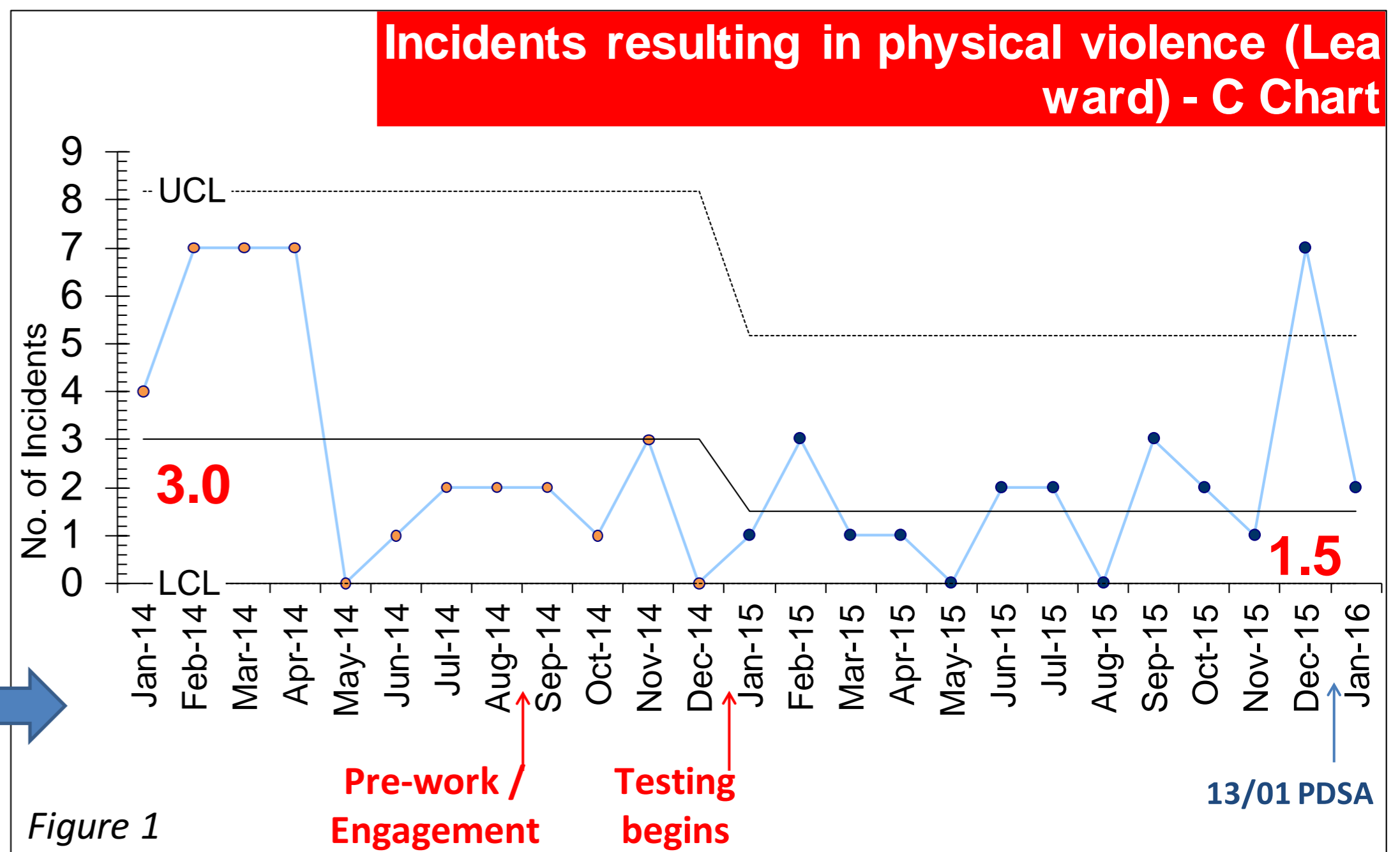


Figure 1

What have we been testing?

Lea Ward has been testing the Tower Hamlets Safety Bundle; which includes having Safety Huddles, using the Broset Violence Checklist (risk assessment), using Safety Cross calendar and discussions of safety in community meetings*. We have also refined our approach to Section 17 leave, improving the process by which leave is managed and minimising reductions and cancellations in leave.

We are still learning how to make our change ideas more effective and are currently focusing on **improving our Safety Huddles**. Despite our 50% reduction in December 2015 we saw a spike in incidents (see fig 1); special cause variation.

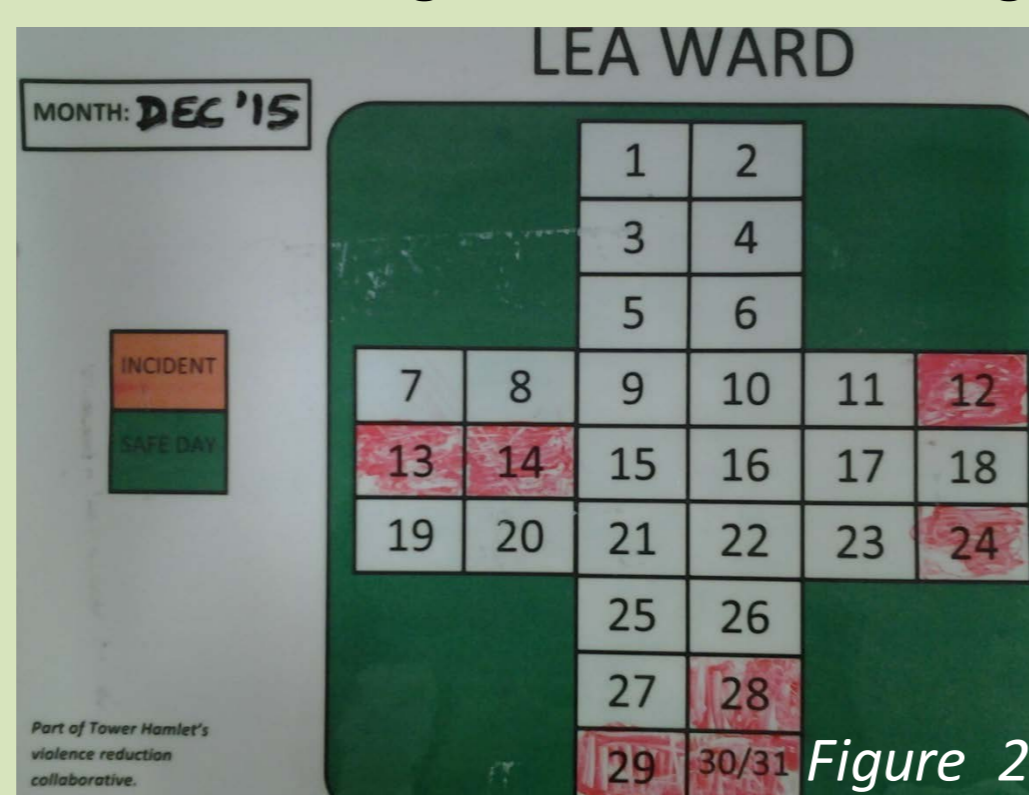


Figure 2

We reflected on these as a team, and identified 2 key factors:

1. We needed to strengthen prediction (rather than just identification) in Safety Huddles, and
2. We needed a better system for distilling our learning about what approaches were working/not working with service users and ensuring these are passed on to teams working on subsequent shifts.

Based on this, we developed our current PDSA, which is a 3 stage approach to our Safety Huddles :

- **AM Huddle (7:30am/7:45am):** as soon as we finish handover from night staff, do a Safety Huddle. Keep focus on prediction by... using 2 questions: *Are you safe? Would person be happy with their care?*
- **PM Huddle (about 3pm):** uses 2 questions, *but also picks up what has been happening throughout the day and what strategies seem to be working*
- **Night Huddle (about 7pm):** change to a "What works" meeting with strong emphasis on reflecting on what strategies have been successful in managing patients, group learning together – "What works (and what doesn't work!)"

Staff record concerns and interventions in a Safety Huddle diary, which transfers strategies and learning to later shifts.

Our learning and plans for our next cycle

Our **process measure - number of safety huddles completed per day** is shown in figure 3 below, alongside our **outcome measure: number of safety incidents recorded on our Safety Cross ward calendar****. There are preliminary indications in this data and our observations that this change of format works and supports us to predict, identify actions, ensure actions are carried out and transfer learning from shift to shift. We can see that reliability of Safety Huddles being done increased when we started the PDSA, and over this period there were fewer incidents.

However we need to gather more data to understand relationships further. We have also identified outstanding issues to take into our next cycle; particularly around how we can develop greater collective leadership across the ward; as reliability dropped when some key staff were away from the ward. We are now developing further guidance and planning an away day session to better support the team to understand the rationale and "how to" of our new Safety Huddle format.

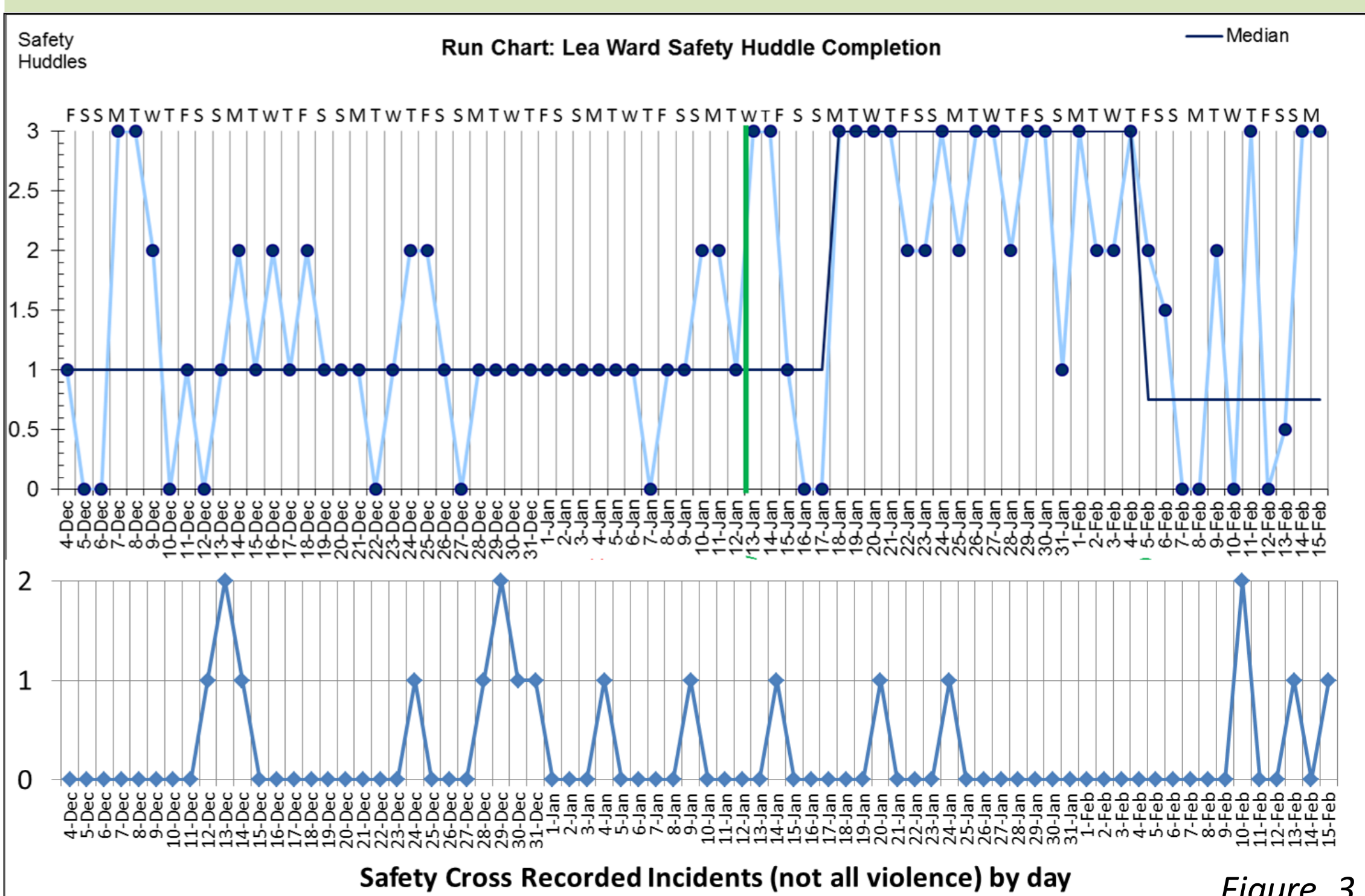


Figure 3

*see poster TOWER HAMLETS VIOLENCE REDUCTION COLLABORATIVE for full description of these change ideas
 ** note this data includes broader safety incidents, such as self-harm, damage to property, aggression, rather than just acts of physical violence from Datix as shown in the top chart