Failure and Success - a Game of Two Halves!

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Today’s session

• Governance of spreading QI projects

• Capability required to Spread

• Leadership for Spread

• Coproduction for Spread
Our 4 Steps

Pro active care

Patient Engagement

Team Work

Environment
TOP DOWN vs BOTTOM UP

1. CLEAR BUNDLE OF INTERVENTION
2. BASIC TRAINING IN USING QI METHODOLOGY
3. TRAINING IN THE INTERVENTION
4. ACROSS 9 COHORTS OVER 2YRS
5. IHI BREAKTHROUGH COLLABORATIVE MODEL
South London and Maudsley NHS Foundation Trust

Providing the widest range of mental health services in the UK

90+ community sites across eight London boroughs, national services

Four hospitals: Bethlem Royal Hospital, Maudsley Hospital, Lambeth Hospital and Ladywell Unit, University Hospital Lewisham.

- Serving a local population of 1.3m
- 4,600 staff
- £380 million turnover
- Close links to Institute of Psychiatry, Psychology and Neuroscience, (IoPPN) King’s College London (KCL)
- NHS Friends and Family Test – 83% of patients would recommend us to family and friends; 96% said they found staff to be kind and caring.
All Incidents 01/04/16 – 31/03/17

- Violence/Assault: 2355
- Staff Issues: 659
- Slips, Trips and Falls: 363
- Fire: 98
- Security: 310
- IT/Equipment/Medical Device: 139
- Manual Handling: 16
- Consent/Communication/Confidentiality: 114
- Sharps/Needle sticks/Fluids: 20
- Medication: 965
- Other accident/incident: 911
- Documented (Records/Identification): 130
- Death: 427
- Self Harm: 101
- Vehicle Incident: 10
- Clinical Assessment: 34
- Infection Control: 30
- Treatment Procedure: 368
- Admission, Discharge, Transfer (AWOL): 735

Total incidents: 8694
Aim

- To reduce violence across two mental health Trusts by 50% within 2 years.
- Health Foundation grant support
- Evaluation Partner – King’s College London
Pilot results

P Chart of rate of violent incidents per week from safety cross

Proportion

21/01/2011  11/03/2011  29/04/2011  17/06/2011  10/08/2011  08/12/2011  24/01/2012  13/03/2012  01/05/2012  19/06/2012  07/08/2012

Week beginning

UCL=0.566  P=0.155  LCL=0

27/12/2011
Four Steps to Safety

- Local Measurement plan
- Clinical Toolkit
Differences between organisations

• QI at different stages of development

• Leadership and support for QI

• Capacity and Capability

• Governance within organisations
The first half...what happened
Acute inpatient - Verbal Aggression to 30 June 2017
(with process change from May 2016)
Acute admission 2 - Physical Aggression to 31 March 2018
(with process change from September 2016)
Low secure - Verbal Aggression to 31 March 2018
(with process change from March 2016)
What went wrong?
Capability

• Training of facilitators

• Experience

• Supervision

• Support
Governance

• Lack of single governance structure

• Made optional through the structure

• Single professional line – nursing
Leadership

• Lack of senior ownership

• Lack of visibility

• Clinical Leadership

• Professional Leadership
What went well?

• Multi-disciplinary working

• Patient involvement ?COPRODUCTION

• Some individual wards succeeded
“NO MORE THEM AND US”
The second half...how have things changed...

- Accountability
- Reporting
- Training
- Governance
Rate of Incidents of Violence and Aggression

Psychosis CAG

Tony Hillis Unit

Shift
Trend

Median (baseline)
Median (post baseline)

Shift - rephased

rate per 1000 bed days

Jan 16, Mar 16, May 16, Jul 16, Sep 16, Nov 16, Jan 17, Mar 17, May 17, Jul 17, Sep 17, Nov 17, Jan 18, Mar 18
Sustainable Improvement; moving from project to business as usual

1. Organisational attention

2. Give staff the tools to improve and coaching when things get sticky.

3. Multiple organisational system changes
Fundamentally ..... 

It's all about changing the conversation