Enhancing Relational Security in Practice using Co-Production

Our Task

To innovate and improve staffs knowledge of Relational Security, Positive Behaviour Support and Least Restrictive Practice.

What we did

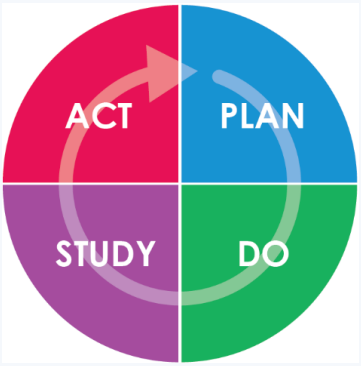
Case Study Method of Training

- Used to prompt and stimulate decision making
- To strengthen team responses in critical moments of care
- To allow staff members to reflect on their own practice

How it went

PDSA Cycle One

- Initial sessions were delivered to staff members only, to trial the method
- Positive feedback received
- In some cases attendance was poor due to staffing
- The need for patient input was apparent



How it went

PDSA Cycle Two- Introducing co-production

- Sessions delivered to both staff and patients
- The incorporations of patients into the session, allowed for reflection of practices taking place
- Patients were empowered to speak out, restrictions were lifted and the culture started to shift

Impact

Qualitative feedback from patients and staff:

"The ward feels more relaxed", "we've stopped using the default, no", "we can have hot drinks and vape when we like", "staff seem more kind", "I now truly understand what is meant by relational security". "I feel empowered to challenge staff when something doesn't feel right ".

One ward identified 26 blanket restrictions in use, within 2 weeks of our sessions, 11 were removed completely. Highlighting a 42% reduction in blanket restrictions

What Next?

- The Case Study method of training has been incorporated into yearly refresher training
- To reduce restrictive practices further, co-production will be prioritised for training on how we keep people safe within our services

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