ImproveWell.

Southern Health and Social Care Trust & ImproveWell | Leigh Ferris, Deputy Charge Nurse at Southern Health and Social Care Trust

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My name is Leigh Ferris and I am a Deputy Charge Nurse at a Psychiatric Intensive Care unit in the Southern Trust. Which is in Northern Ireland.

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Southern Trust provides Healthcare across five council areas, employs 13,000 staff. And annual spend of and between 500 and 600 million.

What was the background to The Rosebrook Psychiatric Intensive Care Unit using ImproveWell?

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Rosebrook was struggling to retain staff. There was a poor culture of – "this is the way it's always been done" – and there were difficulties with staff feeling disempowered, not listened to. The staff were working hard. They were working very, very hard. But they were caught in a cycle of reporting the same problems, trying the same solutions, and it was becoming, more of a top-down approach. That was the situation that we were in, so we were haemorrhaging staff, staff didn't want to work there, things weren't working, and we were looking and for change, essentially. So, the idea of even using ImproveWell, the idea of using this new technology was an indication in itself to staff that we valued their input and that we were going in a new direction and that we wanted to hear what was going on. An indication that we believed in their skills, and we believe in their knowledge.

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We were looking to make things more efficient. We needed to generate a change from the ground up. And we really needed to show our staff that we were going to listen to them. And we needed to listen to them and let them know that they were being heard and that's what the app has done because, you post your idea you get a response and you follow its journey to being actioned. And you get the credit for that also and that's really, really important - giving that feedback. So changed the culture and empowered staff. We wanted to give them a voice, we needed a tool to do this, which is obviously in ImproveWell app. And we need to be able to measure it because we, you know, wanted to be able to say confidently that what we were doing was for the better and, you know, have proof of our endeavours. We also needed to monitor morale because morale was at a very low point at the time of introducing this bit of technology.

How did you manage the roll-out?

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We identified a highly motivated and influential staff member as a champion. I was given the job of introducing it, but my role was to see who, in the team, you know was motivated and influential enough to carry the message that this was a worthwhile thing to get involved in. I suppose it's about recognising who naturally made to have a view that it's not going to work and giving them some ownership in pushing it out because that instantly will negate some natural pools of resistance.
But also recognising that with any change, you know, or introduction to new technology, there will be a resistance. That was key in driving forward, you know, the user involvement. So we used emails, posters and the app, and staff were incentivised. We were adding extra time on to the breaks to allow them to register. So it wasn't another thing they had to do it didn't impede on their own time and you know, as staff provided new ideas, you know, in conversations, they were recognised at that moment: "That's a great idea, perhaps you should log that and, why don't you take some time off the floor, go and log that idea and just see where it goes". It really started to foster this, feeling of we're working together. We're building something. And then we fed back to ensure that people were being recognised for their achievements and their suggestions, and their innovation. And then we used the app to survey the success of ideas and to give staff a platform for some fun things. So, we use the app also to survey where they want to go for their team-building exercise. And that increased users as well. The immediate successes for us took no money at all. The ideas that came forward, were about systems were about how we were already doing things, and about how we can improve that with just changing how we do things.

What are some examples of the great ideas implemented as a result of the programme?

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We are in a Psychiatric Intensive Care Unit, safety and security is paramount because we deal with some very challenging illnesses and some high risk situations.

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So, we have the safety nurse was suggested and that was from learning from other staff who had been elsewhere and had seen how things were done elsewhere and how they worked. So they made suggestions regarding nurse roles and one of them was a safety nurse and that gave clear role development, it saved time, it defined the role and improved overall safety for staff, patients and provided a consistent approach to how we do and how we look after safety and risk concerns on the ward. Similarly, we had the medication nurse and how we were doing medication had to be improved, there were and too many areas were possible errors could happen and on occasion, there were a few errors that did happen. The medication nurse role was an idea that had with it and auditing suggestions, improved safety suggestions and clear defined roles and consistency in communication.

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And again, these two ideas completely changed the staff confidence in their jobs, it gives them real pride in their work and everybody just started to work a whole lot better with these suggestions and things really started to improve and save time and energy, and particularly as we were using a lot of agency staff as well. So the agency staff were able to come in and adapt to these clearly defined roles and in a way that was just consistent. It was really, really helpful.

What has the impact of using ImproveWell been over the last 12 months?

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And so in the last 12 months like we, you know, we haven't lost a staff member prior to the 12 months. We had lost and many, you know, double figures. And recruitment has been successful. There's a change in what others perceive in our team and it's a place where people want to come to work. And that's a clear sign that our aim of improving the culture on the ward is working.

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Some other successes environmental successes new furniture on the ward, you know, having them suggestions coming through the growing level and feeding them up through Senior Management through with this as evidence that this is something that's been identified and it not feeling like a problem then and we're waiting on some other more longer-term suggestions to come into fruition.

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in terms of our quality improvement goals this app actually, you know, made things easier because was one, channel to collect ideas, to go on to answer ideas, to provide feedback, to review successes, to create graphs, to contact people. So in many ways you're maybe logging in once a day and or maybe a couple of times a week to review these and that's all you really needed to do, in terms of time. So it actually save time but in the beginning getting started, maybe it was another thing to do, but it's once it's running it saves time actually.

What for you, is unique about ImproveWell?

(09:20)
This is changes from the people on the ground, who know what they're doing, and who know when isn't working and who know why it's not working and they are guys that are seeing the solutions. And if you don't have this app, they are speaking about the solutions and the clinical room, in the corridors and the staff room and they're speaking about them day in, daily to the point where they're becoming frustrated and that's, that's what was happening for us. So this is just a way of capturing ordinary conversations and ordinary ideas.