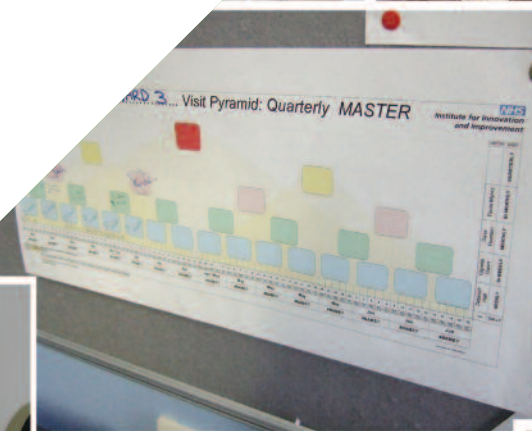## Releasing Time to Care

The Productive Mental Health Ward

Executive Leader's Guide

Version 1
This document is for executive leaders, project leaders and nursing directors

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

What does the Productive Mental Health Ward have to offer you?

The Productive Mental Health Ward:
- offers a systematic way of delivering safe, high quality care to patients across your organisation
- feedback from all the sites which have implemented the Productive Ward so far say that their expectations were exceeded
- they saw their staff empowered and enthused to make challenging changes to the way they worked

Typical impact from the Productive Ward in general healthcare settings:
- observation frequency increased by 20% (catching people deteriorating early)
- 20 seconds per toileting episode saved (75 per shift)
- medicine round time reduced by 63% (allowing re-investment of time into safer care)
- handover time reduced by 1/3 but quality increased
- typically £400 of stock returned to central stores
- meal wastage rate down from 7% to 1%
- direct care time moved from 25% to 46%
- reduction in patient complaints (from quality of care)

- calmer wards
- increased morale
- breaking down of nurse/management barriers and nurse/doctor barriers
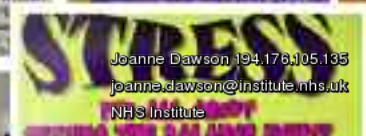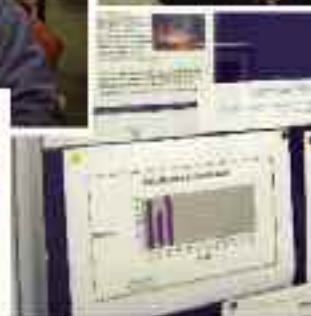
Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

02

Aim of this guide

This guide will help you formulate
what success would look like in
your organisation. It will give
you more detail of the exciting
opportunities, and challenges,
which lie ahead, and will help
to answer the questions.

04

Contents

At the back of this booklet is a short 10 minute introductory DVD entitled 'Releasing Time to Care' which you should view before reading this guide.
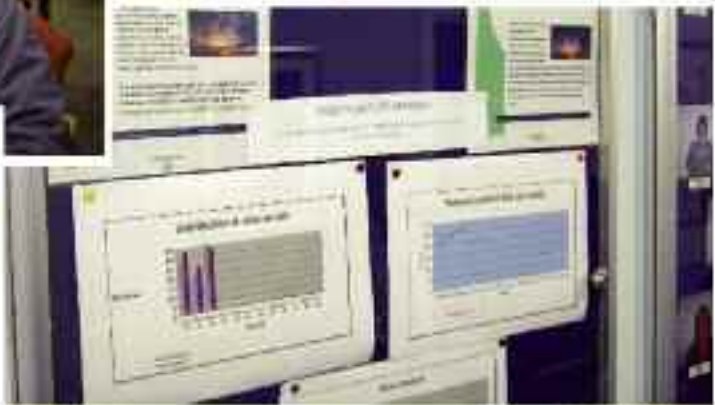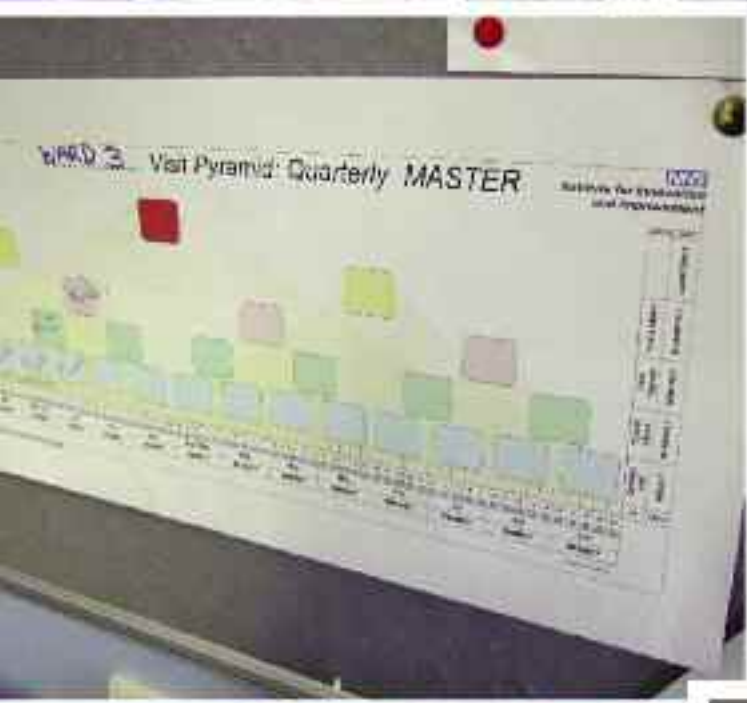
Context

The Productive Mental Health Ward Executive Leader's Guide

Why focus on a ward?

The temptation we face is to look elsewhere in our organisation for sources of improvement. While organisational improvement is valid, much can be done by ward staff to improve their own environment without having to wait for other improvements by other departments.

For example, a ward may take the view the delay in pharmacy, such as waiting for leave medication, delays the leave process. This may be true to an extent, but ward staff can negate some of the impact by ensuring leave medication requests are not left hanging around and are sent to pharmacy.
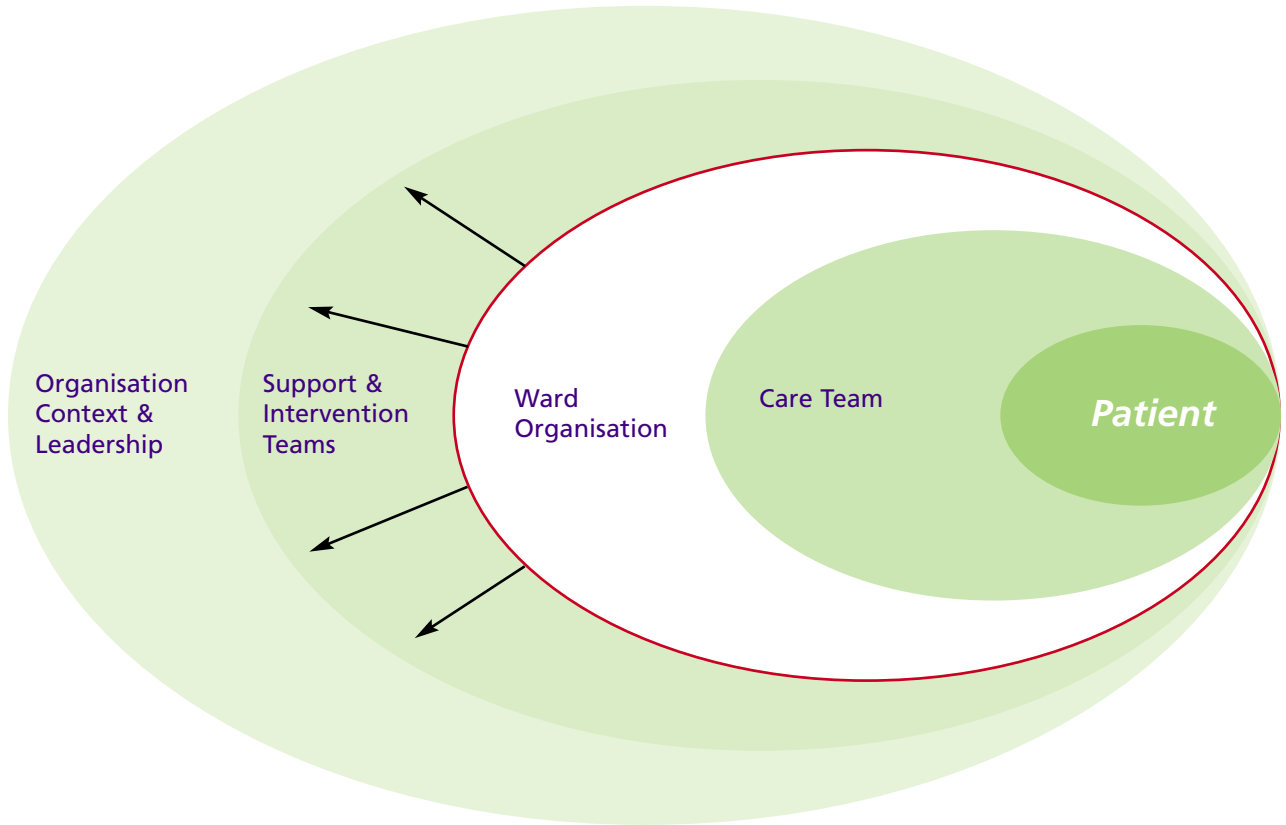
The Productive Mental Health Ward looks inwards at ward level, to understand the impact on other departments.

The Productive Mental Health Ward will help you address the pull on your ward leaders' jobs

Meeting
performance
standards

Improving
patient
safety and
outcomes

**The
Productive
Mental
Health Ward**

Improving
patient
experience

Balancing
the books -
financial
pressure
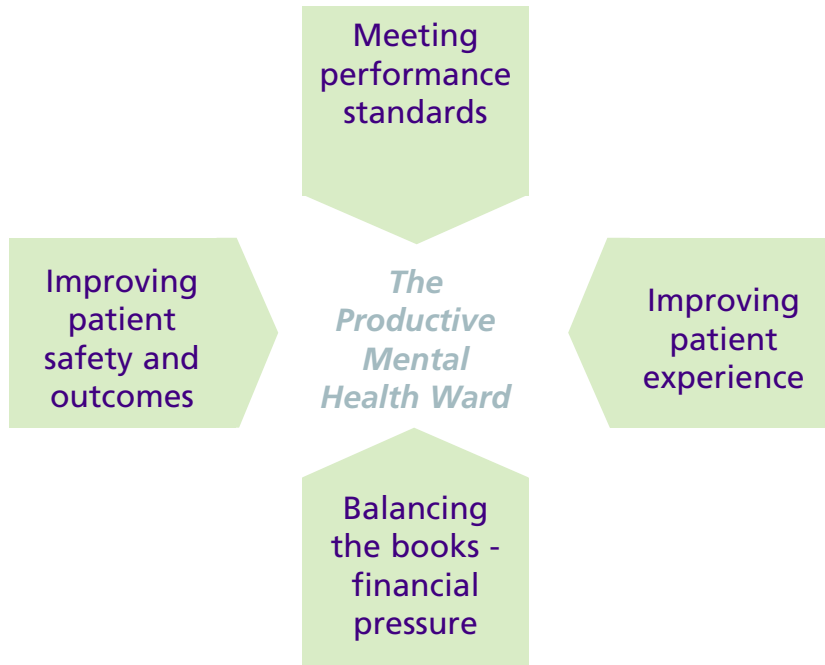
The response to these seemingly conflicting priorities, is often to request more resources. ie, to do more, you need more.

The Productive Mental Health Ward proves this is not the only way. With the Productive Mental Health Ward, your teams can deliver these priorities with your existing staff levels.

Direct care time is the focus

By releasing time your teams will be able to concentrate on delivering best practise that are safer, more reliable. Patients who receive safer, more reliable care, respond to interventions better and then spend shorter time as in-patients.

100%

a single nurse's shift

First area of opportunity to remove wasteful activities

We should focus on improving efficiency of direct patient care activities as a second step

Available time	Motion	Paperwork and admin	Handovers	Medicines management and preparation (away from patient)	Discussion with others	Other	Personal hygiene	Direct patient care
	24	11	10	5	5	3	2	37*

* Approximately equivalent to time spent within patients bedside area source: ward observations, admissions and general medicine (~13 hours total); team analysis

Your staff direct patient care time affects efficiency, which provides financial benefits

Measures impacted by 'TPW'

Ward cost per patient spell (£/spell)

- Cost / WTE ward staff
  - Cost/WTE by grade
  - Staff mix factor (grades)
    - Bank & agency staff [ratio]
    - Qualified to untrained staff nurses ratio
    - Clinical to non clinical staff ratio
- WTE ward staff/spell
  - LOS per spell
  - WTE/occupied bed day
    - WTE/ward bed
    - Bed utilisation

Proportion of 'direct patient care time' in a nurses' day
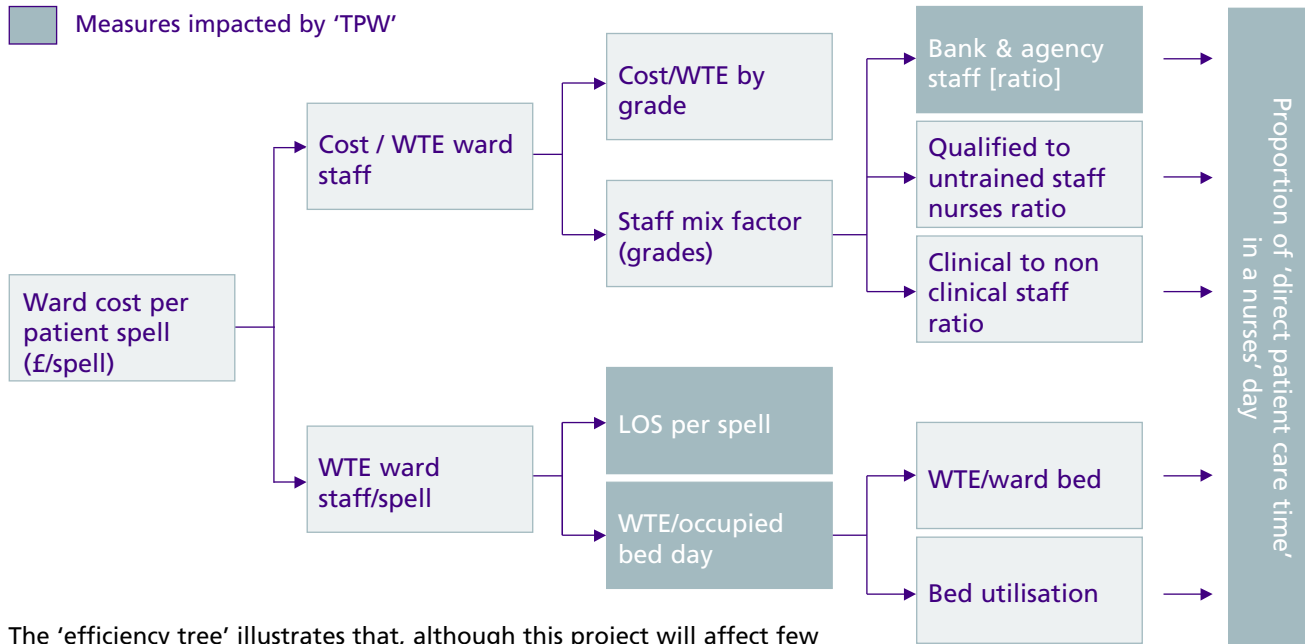
The 'efficiency tree' illustrates that, although this project will affect few metrics directly, increasing the proportion of nursing time spent on direct care will eventually reduce ward cost/spell.

Modular structure
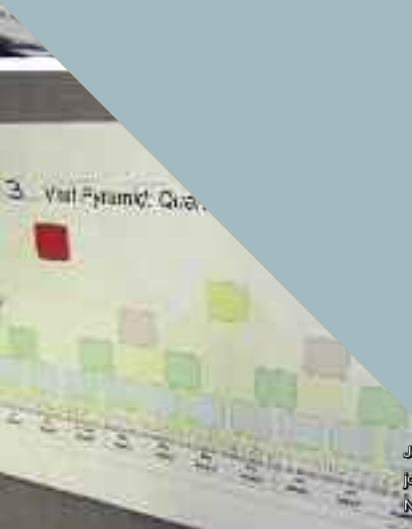
These modules create a Productive Mental Health Ward

Productive Mental Health Ward

Process Modules

Patient Wellbeing	Therapeutic Interventions	Ward Round

Safe and Supportive Observations	Admissions and Planned Discharge	Shift Handovers	Meals	Medicines

Toolkit

Foundation Modules

Knowing How we are Doing	Well Organised Ward	Patient Status at a Glance

Ward Leader's Guide

Project Leader's Guide

Executive Leader's Guide

Aim of the modules

The modules are designed to provide a no nonsense structure for implementing the Productive Mental Health Ward.

All of the modules, other than this Executive Leader's Guide and the Project Leader's Guide, are designed for self directed learning at ward level.

The modules are a scaleable, shop-floor led, application of lean methods at word level.

A ward leader implementing the Productive Mental Health Ward will start with the Ward Leader's Guide. Then, with the ward team, they will implement the foundation modules (as highlighted). These provide both a solid foundation for the more

challenging 'process' modules (as highlighted) and a grounding in basic improvement principles.

The modules are designed to be used by a facilitator leading a team. Whether this facilitator is the ward leader, other ward staff member or someone external to the ward is dependent on the competencies of the ward leader and the internal improvement capability of your organisation.

General structure of each module

Each module undertaken on a ward follows the basic stages illustrated below:
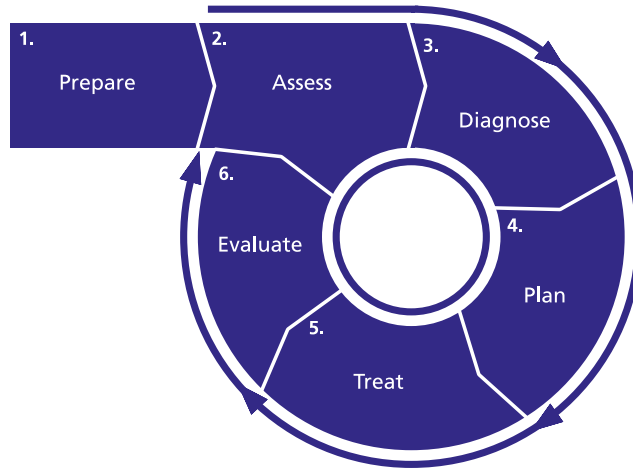
While illustrated using a patient care cycle, the cycle is the same as the generic improvement cycle 'Plan, Do, Study, Act'. Giving ward staff a structured improvement approach to improving ward processes that is very similar to the care cycle they are used to.

Learning objectives

In addition the modules feature guidance and objectives for the facilitator in the form of learning objectives. These objectives are set at the start of each module and assessed at the end. They are based around general improvement techniques with the aim of building internal improvement capability on the ward as soon as possible.

Healthcheck baseline

Finally, each module contains a baseline section where the robustness of the ward's processes, in relation to the specific module areas, are tested before and after the module's implementation. This allows ward staff to test their processes and follow their own progress in addition to the usual measures based systems.

Module summaries

Executive Leader's Guide
What your organisation needs to commit, getting started, how to ensure sustainability and build capability for spread.

Project Leader's Guide
Defining and managing project resources, choosing where to start, governance, ensuring high quality implementation and planning for spread.

Ward Leader's Guide
Key principles of the Productive Mental Health Ward, leading the ward team, sustaining gains.

Knowing How we are Doing
Developing ward based measures to help ward teams make informed decisions.

Well Organised Ward
Making ward areas work for staff instead of hinder them in the delivery of care.

Patient Status at a Glance
Ward teams developing visual patient information that improves communication, patient experience and patient pathway.

Meals
Reducing the time teams spend physically delivering meals and allowing more time for teams to interact during meal time. Ensuring proactive nutritional assessment for patients.

Medicines
Your team ensures medication times are patient centred and the self administration of medicines is safe and reliable.

Admissions and Planned Discharge
Ward teams ensure quick, purposeful, standardised and prompt admission process that immediately plans for the patient's discharge.

Shift Handovers
Reducing the time teams spends on handovers, while making the information handed over more appropriate, easier to remember and easier to understand.

Safe and Supportive Observations
Increasing the standard of patient observations carried out by ward teams. Ensuring they are accurate and that appropriate action is taken with the results.

Patient Wellbeing
Ward teams improve the supporting processes for patient wellbeing focused procedures so they are consistent, maintain a high standard, offer a better patient experience and achieve the standards the organisation aspires to.

Therapeutic Interventions
Ward teams improve the supporting processes for theraputic interventions so they are consistent, a better patient experience and achieve the standards the organisation aspires to.

Ward Round
Ward teams work with their consultants' team members to ensure clarity of outcome and clear planning from their ward rounds while making the ward round quicker and more consistent.

Toolkit
A step by step guide to all of the Productive Mental Health Ward tools. For ward teams to use in conjunction with the modules.
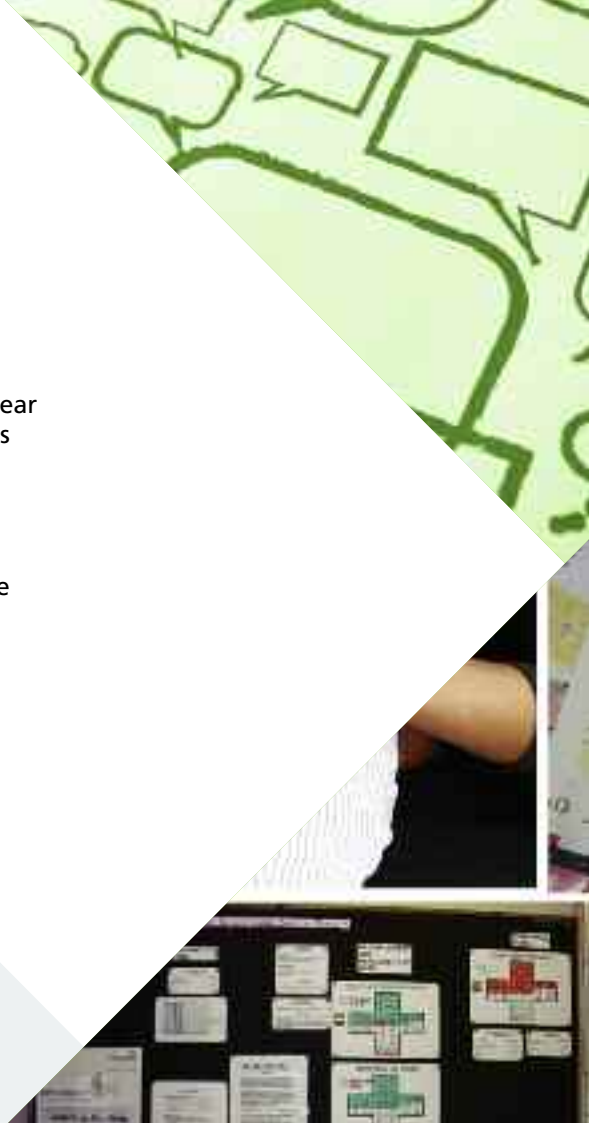
Status of the modules

All of the Productive Mental Health Ward modules originate from comprehensive testing in general healthcare settings accross 16 different hospitals.

These mental health specific versions of the modules have been tested, on a small scale, in an additional three test sites. All of which are mental health organisations.

This should be acknowledged before implementing these modules by the facilitator (whether ward leader or improvement facilitator) and should consider this while planning for these modules.

As always, feedback on these modules, and others, is greatly appreciated by the Productive Ward team.

Guidance for the executive sponsor

Influencing the behavioural characteristics at ward level

Experience from Productive Ward testing has proved that senior leadership support is vital for sustained implementation. How the Productive Mental Health Ward is led has a direct impact on the level of improvement achieved.

Experience has shown that the way the Productive Ward is led impacts on the characteristics of not only the ward staff, but also the support services that play a vital role in the delivery of quality services.

Standards across the organisation

Consistency of approach is vital for uniformly high standards of patient care and for workforce flexibility.

Standards are widely used in the Productive Mental Health Ward to build this consistent approach.

The Productive Mental Health Ward leads staff toward developing standards for workplace organisation, key ward processes and the management of information.

This ensures best practice for the patient and also familiarity of working practices from ward to ward, allowing staff to move with ease.

Standards for key ward processes are always based on the most up to date organisational policy.

The Productive Mental Health Ward concentrates on the process delivering the end standard, not the end standard itself.

The Productive Mental Health Ward Executive Leader's Guide

Timing

There will never be a time when there are no other initiatives to consider.

In order for you to get the maximum benefit from the Productive Mental Health Ward, you should consider two workforce issues:

1. Is the establishment stable for the foreseeable future?
   • the right people in the right place

2. Are you currently undertaking any workforce reform programmes?
   • staff need time and space to focus on the Productive Mental Health Ward and not be distracted by other workforce issues

The Productive Mental Health Ward will help you re-design your work processes and improve the quality of care for patients. It is not a tool to help you with your workforce reform issues.
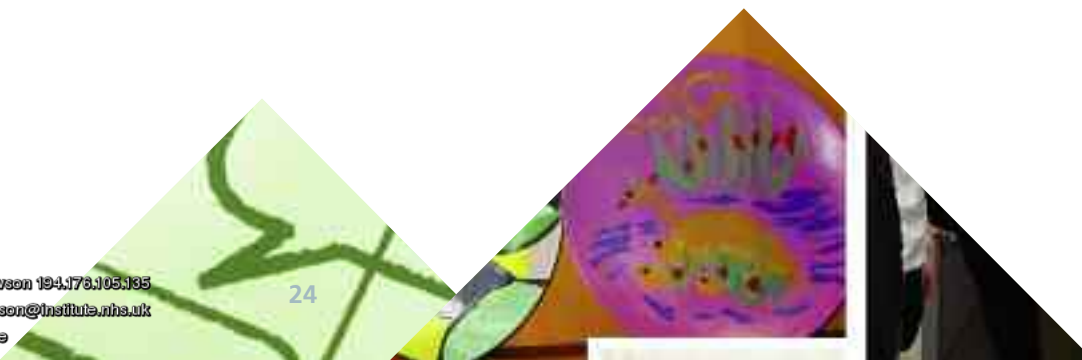
Realising the benefits of the Productive Mental Health Ward

The potential of the Productive Mental Health Ward is that it empowers and involves staff to focus on the delivery of quality patient focused care. It puts them back in control of their ward, making the decisions that affect them and their patients on a day to day basis.

Evidence from our test sites show that a substantial amount of time can be saved. You need to be thinking and planning now about what you will do with this time.

As with all improvement work, the Productive Mental Health Ward creates opportunities and thus strategic choices. Time saved can be used in many different ways but it is important to remember the core of the Productive Mental Health Ward – Releasing Time to Care…

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

Strong line leadership of the Productive Mental Health Ward

Based on the experience of testing the Productive Mental Health Ward, it has proved vital that line management of ward-based staff are trained in Productive Ward at an early stage.

Leaders such as line managers, lead nurses, clinical director and general managers all need to be able to role model and coach their staff.

They need to be consistent in message and visibility. Experience has shown that inconsistency of commitment and purpose from line leadership can hamper Productive Mental Health Ward implementation.

A positive and open minded consultant community goes a long way to ensuring sustained Productive Mental Health Ward implementation.

Getting started

Create strategic goals and alignment

Your vision

If the Productive Mental Health Ward is not one of the organisation's top five strategic priorities you should delay implementation.

It will distract you from your other objectives and will eventually fade out.

Set out your vision for the Productive Mental Health Ward before you start. The Productive Ward should fit with your organisational strategy and vision.

The Productive Ward will be your delivery vehicle for many parts of your organisation's strategy, but only if it is firmly integrated into your strategy.

You and your leadership team must consider how the Productive Mental Health Ward fits with each element of your strategy. You should consider how the Productive Mental Health Ward challenges your existing strategies, how to answer these challenges and what policy deployment processes are required.

Defining and aligning your vision, goals, resulting strategies and measures throughout your organisation will:
1. Test if the Productive Mental Health Ward is really for you.
2. Ensure the Productive Mental Health Ward is spread and sustained in your organisation in the most efficient manner.

While the Productive Mental Health Ward is a 'bottom up' methodology, its success depends on clear and visible links to your organisation's strategy.

Strategic goals and alignment checklist

The grid below is designed to help you consider the relationships between your current strategy and the Productive Mental Health Ward

Strategic priority	How does the Productive Mental Health Ward fit?*	What challenges does it pose to the current corporate strategy?	How do we address these challenges?	Can our staff see a clear link between the Productive Mental Health Ward and the organisation's strategic goals?	How do we measure the Productive Mental Health Ward's contribution to delivering this strategy?	What existing improvement capacity and infrastructure is already committed to this strategy?
Improvement strategy	• ensures there is complete alignment with organisational strategy and objectives					
HR strategy	• ensure ward managers develop leadership, and systems management competencies, to complement clinical competencies					
Clinical governance	• develop consistent operating standards across multiple wards – enabling staff flexibility and consistent quality					
Corporate governance	• develop ward measurement systems that provide foundations for performance management					
Information strategy	• provide blueprint for ward-based measurement • drive informed decision making					
Performance strategy	• ensure ward leadership make informed decisions considering financial implications • LOS and staff flexibility contributes to increased productivity					
Safety strategy	• ensure measurement systems developed to give timely and actionable safety information to ward staff • safety and reliability systems developed • collaborative approach to patient safety developed					

You can find a larger, blank copy of this grid on the NHS Institute's web pages.

* a selection of the many benefits of the Productive Mental Health Ward

Board level sign up

As the executive leader of the Productive Mental Health Ward your role is not only to influence and work with the staff on the wards but also to influence and communicate with senior colleagues and board members.

What does this mean?
- ensure there is board sign-up and understanding of the Productive Mental Health Ward
- be clear what benefits the Productive Mental Health Ward will have for your organisation
- be clear that there will be challenges for the organisation, not just on the wards but also within other departments
- ensure the board understands this is a programme focused on improving the quality of care for patients, not an opportunity to reduce costs
- ensure that senior colleagues understand the need to be visible on wards, supporting the staff

Putting the right team together

Despite the focus on the ward, a successful implementation is entirely dependent on the teams that you put in place to guide and support the project.
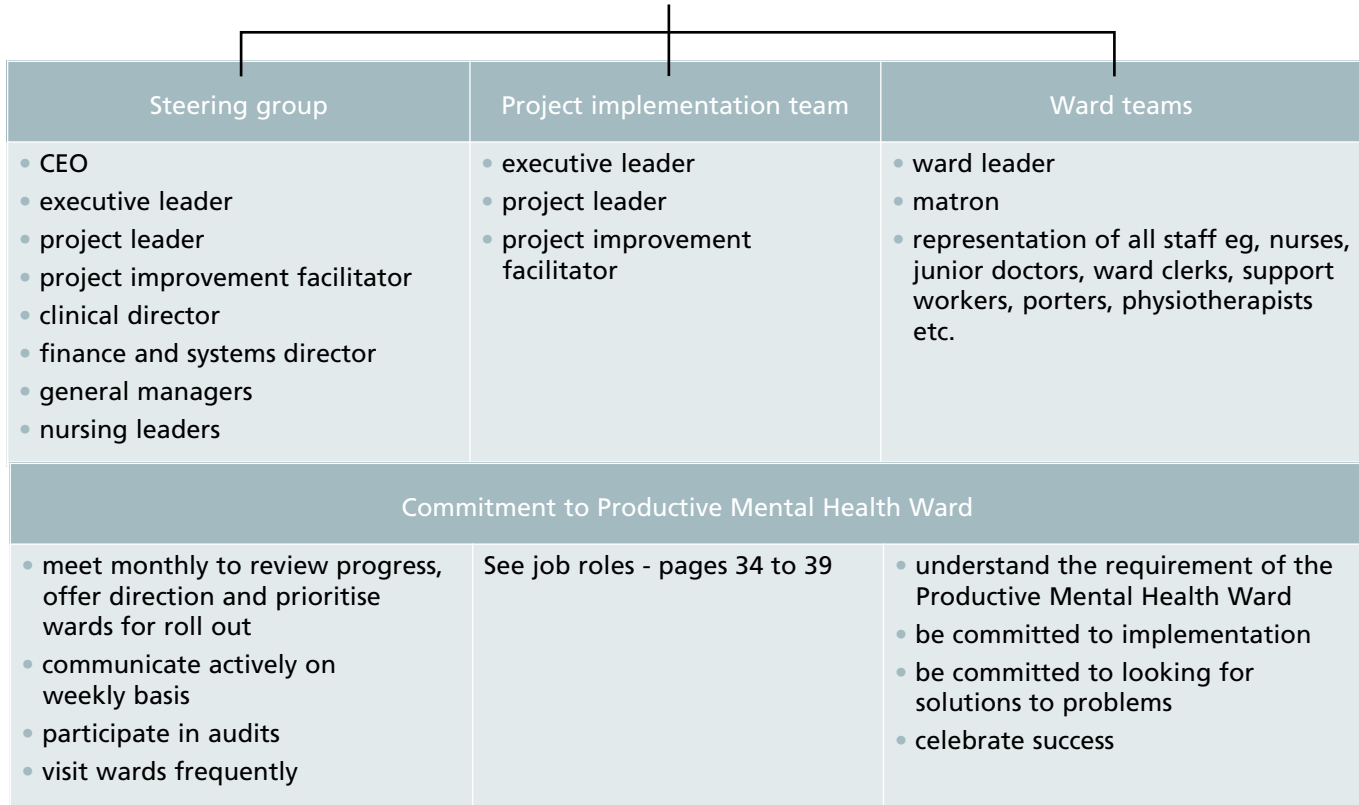
In addition to your role, there are two other key roles:
- the project leader – this should be at assistant director level and is often the assistant director of nursing
- the project improvement facilitator – this should be somebody who is experienced in implementing change projects

The implementation also needs to be guided by a steering committee comprised of senior staff who are able to influence decision making within the organisation.

Equip the project team with the skills required to play their roles effectively. (eg, provide project management training, visit an organisation which has already implemented Productive Mental Health Ward to benefit from their learning etc.)

Executive leader

Steering group	Project implementation team	Ward teams
• CEO • executive leader • project leader • project improvement facilitator • clinical director • finance and systems director • general managers • nursing leaders	• executive leader • project leader • project improvement facilitator	• ward leader • matron • representation of all staff eg, nurses, junior doctors, ward clerks, support workers, porters, physiotherapists etc.
Commitment to Productive Mental Health Ward		
• meet monthly to review progress, offer direction and prioritise wards for roll out • communicate actively on weekly basis • participate in audits • visit wards frequently	See job roles - pages 34 to 39	• understand the requirement of the Productive Mental Health Ward • be committed to implementation • be committed to looking for solutions to problems • celebrate success

Support teams
• information analyst • finance team analyst • supplies • pharmacy • housekeeping

Commitment to Productive Mental Health Ward
To support implementation of Productive Mental Health Ward which includes providing data and information as required. To understand that the implementation of the Productive Mental Health Ward will impact on their department and they will be required to work collaboratively to ensure that systems are working efficiently.

The roles of the project leader and project improvement facilitator

You are the executive leader of the Productive Mental Health Ward and your role is to oversee implementation at an executive level.

Project leader
• is responsible for the successful planning and implementation of the Productive Mental Health Ward

Project improvement facilitators
• will work on a day to day basis with the ward staff to ensure that improvement techniques are taught, understood and implemented on the wards. They will be committed, on the ground coaches

It is the role of the improvement facilitator that generally dictates the pace of spread. The faster you wish to spread, the more improvement facilitators you will need. More on this on page 38.

Team time commitment

The table below details the time commitment you will need to make available to implement the Productive Mental Health Ward on one ward. You will need to increase your commitment when multiples of wards are involved. You will need to maintain this commitment for at least six months.

Team	Role	Time commitment
Steering committee	CEO	1 hr/month
	Director of operations	1 hr/month
	Director of nursing	2 hrs/month
	Clincial director	1 hr/month
	Finance director	1 hr/month
Ward team	Ward leader	50% total time
	Line manager	20% total time
Support team	Information analyst	1 day/month
	Finance analyst	½ day/month
Project team	Project leader	50% total time
	Project improvement facilitator	100% total time

Project leader

It is strongly recommended that you have project leader resources in place to support your Productive Mental Health Ward implementation.

The table below details some of the competencies required for such a role:

Role definition and competencies

Role description	• project management – ensuring the day to day implementation according to the agreed action plan
	• support to both executive leader and project management facilitator
	• stakeholder management – this is required not only within the ward setting but with all departments within the organisation
	• communication – establishing and implementing a communications plan
	• visible involvement – both to the steering group and the ward staff
	• to lead by example – especially when implementing change is difficult
Competencies	• previous experience of leading complex change projects
	• involvement and understanding of strategic and business planning
	• ability to influence at all levels within the organisation
	• excellent communication skills
	• ability to drive forward to achieve the desired outcomes even when there are challenges
	• ability to collaborate with others
Commitment	• one person allowing a minimum of two days a week

Project leadership in detail

The project leader should be able to work as a peer to you as the executive sponsor. They should be well connected to the detail of the project – and ideally someone with proven project management skills and who can build a solid understanding of Productive Mental Health Ward modules

The project leader should:
• define the standard ward-level implementation plan (ie, week-by-week plan for core set of modules)
• play the co-ordinating role between the Productive Mental Health Ward and other, related organisation-wide projects occurring in parallel (eg, ward refurbishment programme, materials supply improvements)

• consider holding a small investment budget (eg, £500-1,000 per ward) at project level to ensure rapid resolution to minor requests for spend (eg, buying white boards, installing shelves)

The Productive Mental Health Ward Executive Leader's Guide

Project improvement facilitator

It is strongly recommended you have improvement resources in place to support your Productive Mental Health Ward implementation. Depending on the internal capability of your organisation you may already have these resources in place. If not then the table below details some of the competencies required for such a role:

Role definition and competencies

Role description	• to ensure the ward staff are competent in the implementation of improvement techniques • to work on the wards on a day to day basis ensuring that agreed actions are implemented • to ensure the required information is available to measure performance and improvement • to work with other departments within the hospital to improve systems and processes • ensure that all learning is captured and communicated
Competencies	• skilled and knowledgeable in lean improvement techniques • previous experience of training groups of staff • previous involvement in change management projects • ability to deal with difficult situations • excellent communication skills • thorough knowledge of the Productive Mental Health Ward modules
Commitment	• one person full time. The number of people will increase as more wards become involved

Building and managing improvement facilitator capability

The role of the improvement facilitator is to provide on the ground expert coaching to ward leaders implementing the Productive Mental Health Ward.

Expert coaches should be credible with ward staff (eg, former high performing ward leaders, experienced mental health workers). They also should be masters of the Productive Mental Health Ward materials and have the core skills (eg, lean methodology and coaching) to bring the materials to life and to be successful in the role.

If finding staff with these competencies within your organisation is a challenge…

If this is the case then consider training your selected improvement facilitators alongside external experts with lean, coaching and Productive Mental Health Ward knowledge. External experts should work with internal staff on a part time basis over a four month period, at first leading the facilitation of the modules and then, as confidence builds, taking a back seat and acting as mentors to improvement facilitators.

Considerations for managing improvement facilitators:
• agree explicitly the roles of the ward leader, ward staff and the expert coaches
• ensure that the executive sponsor and line managers promote the expert coaches as a valuable and scarce resource. This resource must not be wasted. Ensure wards are prepared to accept this resource on the days it is available to them
• track and evaluate the value of the expert coaches' support to the wards – use the learning objectives in each module to assess the effectiveness of module facilitation
• consider the career/development path for the internal improvement facilitators in the expert coach role

Planning for start-up

If you are going to implement Productive Mental Health Ward successfully, you need to have made careful preparation:
• resource planning – what do you need?
• process planning – what will you do?
• outcome measurement – how will you know you have improved?

You will need to plan your preparation phase carefully:

Activity	Month	200X 0	1	2	3	4	5	6	7	8
TPW presentation to Board		▲								
Fill in self assessment (see data collection)		────────								
Board discussion to agree resource required, timings and cost			▲							
Agree central team										
Baseline data collection for all wards			────────							
Indentify showcase ward				▲						
Speak with senior ward team					▲					
TPW presentation to senior ward team					▲					
Agreement from showcase ward						▲				
Showcase ward kick-off						▲				

A start up checklist is available in the Project Leader's Guide

Planning spread and resource

From the start point of having your showcase (or showcases) selected you will need to plan what pace you wish to implement the Productive Mental Health Ward onto other wards. The pace will be dictated by the number of improvement facilitators you have, the level of engagement and the degree to which processes are already standardised.

The example project plan featured overleaf details a rolling four month schedule starting with two showcase wards and then moving to four wards every four months. This model is reliant on one full time, very competent, improvement facilitator as the ground level coach spending a day per week on each ward.

As the wards become more confident to facilitate their own modules, towards the end of the four month block, the improvement facilitator ramps down on those wards and starts to spend time with wards in the next block. If the organisation wanted to go any faster then it would have to consider a second improvement facilitator.

Finally – wards involved in your Productive Mental Health Ward implementation should never be selected without them applying to be part of the Productive Mental Health Ward. It is vital that this is a PULL not PUSH implementation. For successful implementation wards need to WANT to do the Productive Mental Health Ward. If you are not getting many applications

then perhaps you should consider re-visiting the communications strategy.

Example macro Productive Mental Health Ward implementation plan
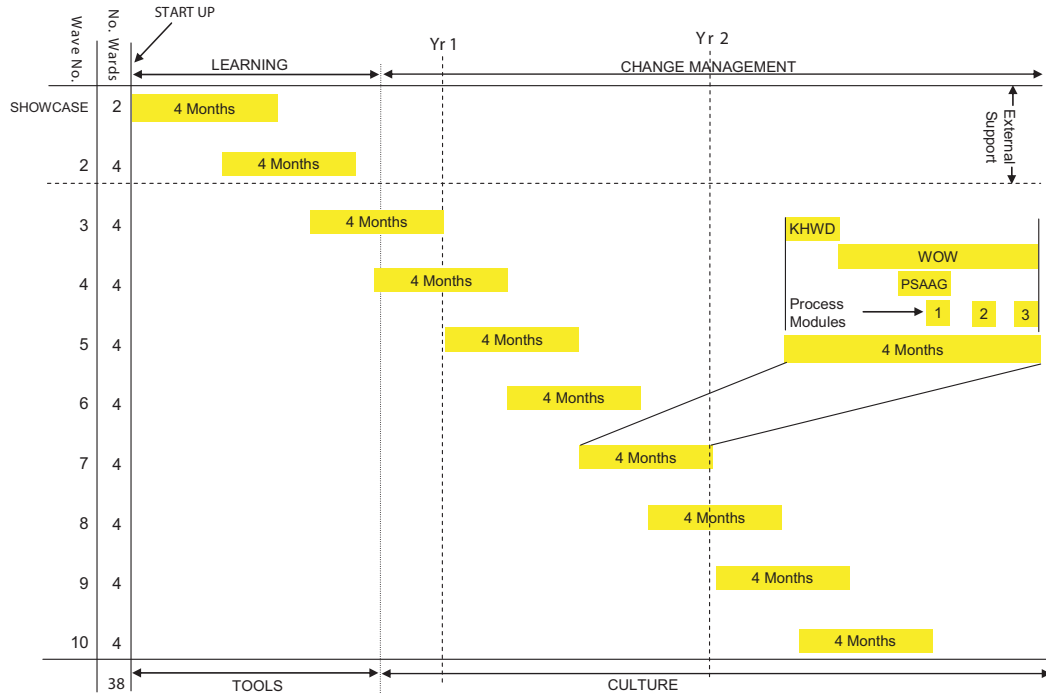
Key:

KHWD
Knowing How we are Doing module

WOW
Well Organised Ward module

PSAG
Patient Status at a Glance module

Process modules
Non foundation modules such as Meals, Safe and Supportive Observations, etc.

Nick Downham

The example project schedule shows a rolling model, with the organisation supporting four wards at any one time (and with wards ramping up and ramping down as each yellow block of four wards overlap).

Each ward's four month block is split up as shown, concentrating on transferring improvement techniques in the foundation modules.

This example shows the use of external support to help implement the first six wards. From then on the model relies on internal capability.

Also shown is the transition between learning Productive Mental Health Ward methods to change management and sustaining the changes. The emphasis on the former being learning tools and the latter about cultural change and supporting systems.

What is your responsibility as the executive leader in the planning phase?

Remember, you have already been challenged to consider if it is the right time to be implementing the Productive Mental Health Ward.

You have been asked to guide and influence the board's decision making.

You have been given help to identify the project leader and project improvement facilitator.

Now you need to start thinking about how you will get started and how long it will take you. The next pages will help you with this.

The showcase/s

Interest in the Productive Mental Health Ward will be created, and maintained, using a showcase ward.

Choosing the right ward as your 'showcase' is crucial.

Choosing the right showcase/s will mean...

- early rewards in return for investment

- live proof that the programme works - and a comparison for subsequent ward/s

- a good 'brand' within the organisation for improvement, and change

- an excited body of staff (especially nursing staff) who will welcome the programme to their ward

Choosing the wrong showcase/s will mean...

- no rewards in return for investment early

- live proof that the programme can fail - and no good comparison for subsequent ward/s

- a bad 'brand' within the organisation for improvement, and change

- a disillusioned body of staff (especially nursing staff) who will not welcome the programme to their ward/s

Showcase/s

This table illustrates the characteristics that your showcase ward/s should exhibit. Previous high ward performance is not enough. You cannot afford a 'hearts and minds' exercise with the ward leader of the showcase ward/s. Additionally it is not recommended that an underperforming ward is chosen. Again, this will take valuable time to overcome, slowing down the establishment of the showcase/s.

How will we select our showcase ward/s?

	Low (Skill)	**High** (Skill)
High (Will)	*"Desperate to be rescued"*	*"Raring to go"*
Low (Will)	*"No sense of urgency"*	*"Reluctant to engage"*

Will

Low   High

Skill - capability to implement

Your showcase ward/s should look like this

How to select your showcase

It is important that the ward/s want to be involved right at the beginning of implementation.

To ensure you select the right ward/s, follow the selection process and complete the selection template.

Communicate widely with all staff

During ward leaders away day, or similar, invite applications

Meet and interview all ward leaders who apply. Assess suitability, manage expectations

Measure against 'showcase template' and select ward

Ensure other wards are kept involved and interested

Pick your showcase if:

Ward name:						
It has a long history of performance under the same leader						
It has low levels of personnel complaints and short term absenteeism						
The ward leadership actively want to be the showcase						
The management above the ward are sure of their ability to release their time						
The ward leader perceives their role as that of a leader, rather than a senior nurse						
It is not going to have a major change in the next year • ward move • renovation • staff re-grading • new leader						
The management structure above the ward (line manager or general manager) have a history of high performance						
The ward leader is collaborative, not autocratic, in leadership style						
The management structure above the ward (line manager or general manager) is collaborative, not autocratic, in leadership style						
The relationship between the ward leader and the ward's consultants is positive						
The ward has a strong history of multi-disciplinary working						
The ward leader, once trained in Productive Mental Health Ward methods, is willing and able to coach and advise other wards on implementation						
Total						

Pick the ward with the most ticks

Example of completed table

Joanne Dawson 194.176.105.195
joanne.dawson@institute.nhs.uk
NHS Institute

Making sure the showcase is sustained from the start

The NHS Institute has developed an easy to use Sustainability Model and Guide. Use this to test the readiness of the ward you are considering.

Once you have short-listed a ward, before making the final decsion, ask the ward leader, matron and project leader to each complete the scoring section of the Sustainability Model.

Act upon it's results. If the Model raises warning signals about your proposed showcase, then you need to reconsider.

The Sustainability Model and Guide can also be used to baseline and track how your project is progressing. Use it at the beginning, middle and end of your project.
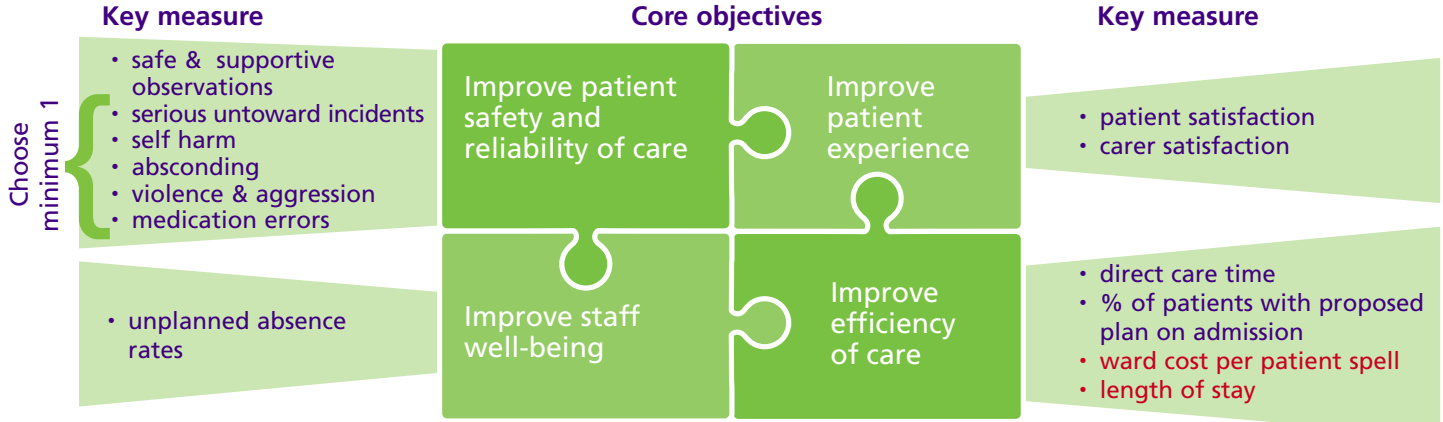

The Sustainability Model and Guide is available, free of charge, from www.institute.nhs.uk

Knowing How we are Doing

The Productive Mental Health Ward will help improve four key dimensions of care you provide

Performance is tracked against the four basic objectives

Key measure	Core objectives		Key measure

Choose minimum 1

- safe & supportive observations
- serious untoward incidents
- self harm
- absconding
- violence & aggression
- medication errors

Improve patient safety and reliability of care

Improve patient experience

- patient satisfaction
- carer satisfaction

- unplanned absence rates

Improve staff well-being

Improve efficiency of care

- direct care time
- % of patients with proposed plan on admission
- ward cost per patient spell
- length of stay

Measures in **blue** = basic measures for improvement that need to be in place early on
Measures in **red** = advanced measures to implement as and when available (ideal situation)

This provides you and your ward team with a balanced set of measures

Our learning so far is that it can be difficult to obtain this baseline data. Your responsibility is to support the project leader and influence throughout the organisation to ensure that as much data as possible is made available.

If you are unable to obtain the exact measure suggested, use the **closest existing data**.

Detail on these measures is available in the Knowing How we are Doing module.

Key principles to make measurement part of the course

- set the expectation, from the outset, for measurable impact (eg, through the metrics tracked in Knowing How we are Doing) by asking searching questions during programme board reviews

- during ward visits, ensure that execs and senior nurse managers visit the performance board and ask questions about performance. This illustrates the importance of tracking and improving performance – use the featured visit guidance sheets

- develop a ward-to-board integrated set of key performance indicators (KPIs) to evaluate the impact of Productive Mental Health Ward

- expect ward leaders and staff to develop explicit plans for where to reinvest the time saved through Productive Mental Health Ward (eg, by saving x minutes per day on handover we will reinvest that time in supporting education and training of ward staff)

10 point Productive Mental Health Ward healthcheck

It is useful to create an understanding of how your showcase ward's existing processes reflect the Productive Mental Health Ward vision. This will give you and your steering committee a view on where the showcase is starting out from and what rigorous processes you will need to develop a Productive Mental Health Ward. To do this, ask your showcase ward leader and line manager to use the 10 point Productive Mental Health Ward healthcheck tool available at: www.institute.nhs.uk/productive mentalhealthward

The tool will give a healthcheck score which will give you a tangible starting baseline to complement your measures. Re-visit it monthly

to help track improvement. Do this along with your monitoring as covered in the previous section. The first result may well be low. If this is the case support your showcase ward leader in understanding that constructively.

The relevant parts of the Productive Mental Health Ward healthcheck are featured in each module. Allowing wards to self assess the robustness of their processes before and after Productive Mental Health Ward implementation.

Investment in communication

Using the principles described in the strategic alignment (see page 29) section of this document, it is vital to break these strategic links down to a concise and understandable message to staff. Set the Productive Mental Health Ward in its proper strategic context by developing a 'change story' which links it to organisation strategy (eg, delivering an excellent patient experience, improving patient safety and stabilising financial situation).

- ensure the 'story' is grounded in the core objective of improving the quality, safety and efficiency of patient care on wards (not cost!)
- communicating the 'change story' of Productive Mental Health Ward to all ward leaders and ward staff face-to-face (eg, via half day kick off workshops or use existing away days): explaining Productive Mental Health Ward, why the organisation is doing it, what it means in practice, what is expected of ward staff, what ward staff can expect from organisation leaders and so on

- you can then build on this to invite applications as per the previous section on picking the showcase ward(s)
- equip ward leaders to be able to re-tell this story consistently and in ways which are relevant to their own teams and local situation. Provide engaging supporting materials to do this (eg, poster of Productive Mental Health Ward)

- project manager/team to meet or interview all ward leaders who apply to be a showcase ward, taking the opportunity to assess their suitability, manage expectations and cultivate a broader support base
- book slots in regular nursing meetings to provide updates from the pilot wards and ensure ward leaders, line managers, general managers etc. are kept informed
- regular channels for communicating progress on Productive Mental Health Ward (eg, in organisation newsletter, intranet site etc.) and be careful to avoid jargon (eg, many ward staff will not understand 'LOS')
- ward leaders implementing Productive Mental Health Ward to attend programme board reviews and give them a role in the meeting (eg, share stories, examples, posters, photos of what they have been doing)

Communications plan

The Productive Mental Health Ward will bring you communications challenges inside and outside of your organisation.

You will need to consider the following:

Internal communication
- who should you communicate with? –remember all your organisation will want to know what is going on
- what are you going to tell them? – they will want to know how it is going to affect them
- why are you communicating with them? – you may want their assistance or may just feel they should know what is happening around them
- remember to tell them why your organisation is involved with the Productive Mental Health Ward and how it will help achieve the objectives of the organisation

- some groups may need to know because they may have an indirect role to play – such as union representatives
- ensure everybody knows what is happening on the showcase ward/s. You can do this by using an established system of team meetings or a regular newsletter

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

External communication

Everybody wants to know about the Productive Mental Health Ward!

You will find you are frequently contacted and asked about what is happening.

Who might contact you?
- local press
- local commissioning organisations
- other trusts from around the country
- health related publications who may want to do an article on you

In order to manage these requests, you must have a clear communication plan, which everybody is aware of. You should try and get a named person from your communication department to be responsible for the Productive Mental Health Ward.

This is an exciting opportunity for you to publicise the innovative work you are doing.

Who	What	When	How	Why
Internal				
Board	Progress	Three monthly	Report	Keep updated
Supplies	How it will affect them	Immediately then weekly until resolved	Meeting or phone calls	Need assistance
External				
GPs	What is happening	Initially then three monthly update	Article in local GP magazine	Keep updated
Local paper	Exciting development	Initially then three monthly update	Interview	Let local people know what happening

Example of communication plan for considering who you need to communicate with and why.

Visually communicating the Productive Mental Health Ward vision

Staff learn in different ways and some will struggle to understand the potential and vision for the Productive Mental Health Ward, especially in the early stages of your implementation.

A cartoon visualisation of a Productive Mental Health Ward has been created as an alternative way of communicating the vision, principles and methods of the Productive Mental Health Ward. The cartoon is designed to be used as a storytelling prompt, to be printed as a large poster and its

individual elements used as prompts for talking through the important messages and principles of the Productive Mental Health Ward.

This, and a further version of the cartoon is available on the NHS Institute Productive Mental Health Ward web pages, along with guidance notes on how to turn the cartoon into a 45 minute informal teaching session to staff.

Details of how to access this cartoon is available on the NHS Institute website.

Sustain

The Productive Mental Health Ward Executive Leader's Guide

The Productive Mental Health Ward drives organisational change

The power of the Productive Mental Health Ward is that change is initiated from front line staff as they become enthused and empowered by seeing the impact that they can have.

Your role as executive leader is to ensure that the organisation, as a whole, supports the ward/s: that changes made throughout the organisation, to systems and processes, are maintained.

Anticipate that structural or systemic weaknesses in organisational support processes will surface during the implementation of Productive Mental Health Ward. This is a benefit of the approach. These would include, but not be limited to:

- estates - flexibility and responsiveness to make minor alternations to ward (eg, putting up shelves)
- catering - flexibility of catering to deliver food in a way which minimises time required for clinical staff to prepare and deliver meals for patients
- material supply/linen services - responsiveness and reliability of material suppliers (whether internal or external) to deliver stock in the quantity and at the frequency required in order to minimise unnecessary space and cost committed on the ward
- access to other services - flexibility and responsiveness to these services to produce an holistic approach for the service user

Recognise that though Productive Mental Health Ward is focused on ward-based activities, there will be a knock-on effect on other clinical staff groups and processes (eg, occupation therapists, pharmacy, multidisciplinary meetings).

Communicate expectations of active involvement with these stakeholders at an early stage, and manage expectations regarding pace.

Ensure that Productive Mental Health Ward aligns with any other organisational improvement projects which may affect or conflict with it (eg, new ways of working for everyone).

Plan for what will be a significant increase in workload for the informatics/finance team to provide timely and accurate data against which to assess ward performance.

Strengthen this team at the very start by adding a WTE dedicated to the Productive Mental Health Ward and make that person responsible for managing the information flow into the Knowing How we are Doing modules on all wards.

Make your commitment visible

Ongoing visible commitment to sustain. The habit of executive and non executive directors (and other senior leadership team members for that matter) spending time on the wards is vital.

The aim of these visits is to:
- speak with staff and patients first-hand
- gather anecdotes and 'stories' to communicate in other wards
- understand the challenges first hand
- encourage and coach staff, particularly ward leaders

Executive and leadership team visits should be planned and tracked. It is vital they are timely and consistent. To ensure this a visit pyramid and accompanying visit guidance sheets are used. Feedback the level of visits in the project board meetings.

Monthly visit pyramid

Area _____

Role		Interval
CEO	ND	Months
Clinical director	GM ○	Half months
Nursing director	ND ○ ○	Weeks
Line manager	m m ○ ○	Weeks
Ward leader	wm wm wm ○ ○ ○ ○	Half weeks
Senior staff	s s s s ●●●●●●●●●●●●●●●●●●●●●●	Days

Once the process is underway, each visit will carry out a short award created by the ward staff themselves.

* You can find a blank copy of the audit pyramid on the NHS Institute's web pages.

The Productive Mental Health Ward *Executive Leader's Guide*

BEFORE

Communicate to the ward leader before hand:
- intentions
- timing / duration
- availability of ward leader or deputy

Current status of the Productive Mental Health Ward:
- talk to the project team

ON THE WARD

People first, ward second:
- engage staff in casual conversation, ask general questions about the ward and project status
- ask the Ward Leader / deputy about the Productive Mental Health Ward and explore the support the ward leader has been given

Talk to a patient:
- engage patient in casual conversation
- ask patient about their experience on the ward and the hospital generally
- ask the patient about:
  - o what have we done well?
  - o what have we done less well?
  - o what should we continue to do?
  - o what should we stop doing today?
  - o what is next during their stay
    (Planned leave, if appropriate treatment lined up?, next OT visit etc)?
  - o their plans to go home (planned discharge date etc - if appropriate)?

Visit the ward performance board:
- is it up to date?
- ask a member of staff to talk you through the performance board and recent performance
- discuss the link between the measures and the organisations strategy

Conduct an audit:
- conduct the appropriate RED audit as per the ward's audit plan

Communicate:
- your view on the ward's improvements efforts
- your vision for patient care
- organisation priorities for the coming year
- organisation priorities for nursing
- organisation long term strategy

Sign the visit pyramid:
- record your visit to the ward to illustrate your, and the organisations, commitment to the ward

Wrap up the visit with the ward leader or deputy:
- give and ask for feedback
- agree on a max of 2 priority next steps (1 yours / 1 theirs)

AFTER

Reflect on the visit:
- what was going well?
- what needs support / direction?
- what would the ward team think was important to me?

Follow up with the ward leader and the project team:
- what you were impressed by?
- actions for the trustorganisation
- actions highlighted by the audit

Example of visit guidance sheet for use by executive leadership teams.

The guidance sheets standardise visits to ensure all areas of ward operation are explored.

More information on the visit guidance sheets, and visit pyramids is available in the Toolkit.

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

66

Consider how you will sustain the Productive Mental Health Ward within your organisation. The improvement skills being developed at ward level need to be embedded systematically into the organisation. Consider using The Agenda for Change Knowledge and Skills Framework to support improvement skills as valid professional development.

The project board meeting

The project board meeting fulfills two roles:
- maintaining implementation pace and quality
- bridging the gap of understanding between senior leadership and front line staff

Below is an example of what should be included in the agenda of the monthly project board meeting.

Attendees:
- CEO
- executive leader
- project leader
- project improvement facilitator
- clinical director
- finance and systems director
- general leaders
- nursing leaders
- two to four of the ward leaders who are implementing the Productive Mental Health Ward

Agenda:
- review of minutes from last meeting
- poster presentation from ward leaders currently implementing
- progress against plan – resource, process & outputs
- review of project gateways if appropriate
- organisational issues influencing implementation
- review of Knowing How we are Doing
- audit schedule adherence
- healthcheck status per ward
- ward visit adherence
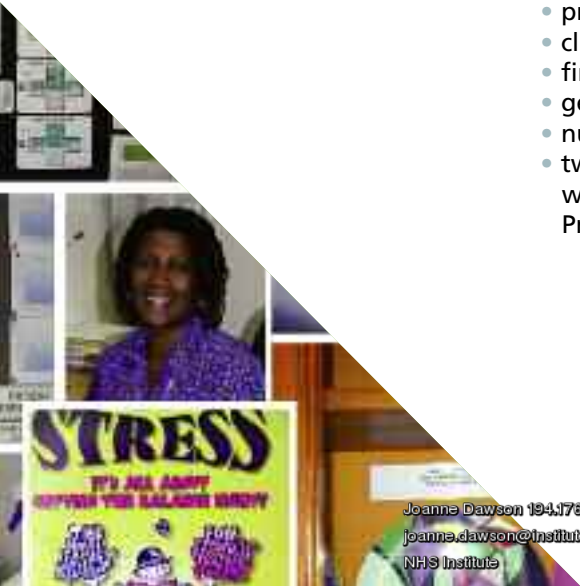
Organisational issues

The process of identifying trust wide issues through the Productive Mental Health Ward, and addressing them in a ward centred manner, will embed the Productive Mental Health Ward and create more interest in wards not yet implementing the Productive Ward. Problems should be addressed promptly and openly.

Systemised standards

As the Productive Mental Health Ward spreads, a key to sustaining the ground made is a robust system of standards and resulting audits.

The challenge will be balancing the need for standardised processes across a organisation and the requirement for staff to learn to develop their own systems. This challenge needs to be considered and planned for from the beginning of your implementation.
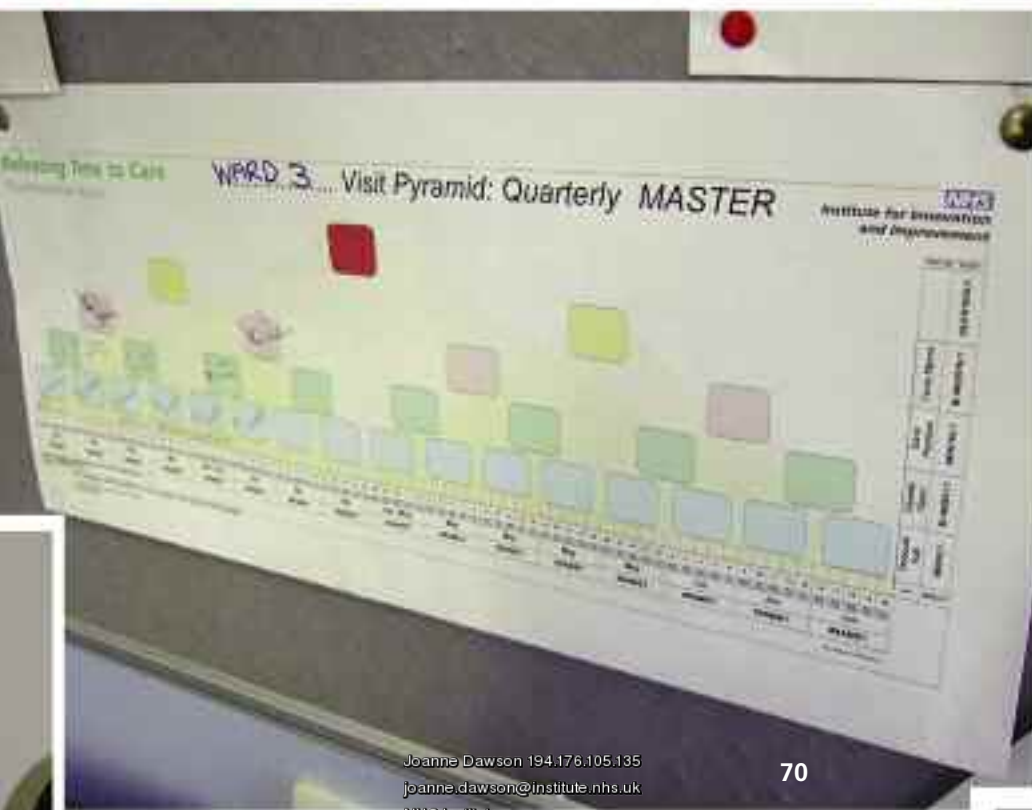
Spread

The Productive Mental Health Ward Executive Leader's Guide

Developing skills within your organisation

The job roles and competencies of the project leader and project improvement facilitator have already been described.

The role of the ward leader and line manager are also vital to the success of implementation.

Capability building is highly context dependent as organisation start from very different positions. Organisations vary greatly in size (ie, number of wards), complexity (ie, range of clinical services, number of sites) and maturity of service improvement (ie, whether or not they have an experienced, full-time improvement team).

Clearly the core project team and expert coaches are the primary mechanism for providing coaching and support to ward-based staff (especially ward leaders) during implementation.

The pace of implementation is dependent on the internal capability of the organisation to demonstrate the competencies required for Productive Mental Health Ward implementation. While buying in external resources could be an appropriate short term solution, many organisations consider the building of internal capability a priority.

Equipping ward leaders with the skills required to lead their teams through the Productive Mental Health Ward could involve:

- on-the-job coaching ('the expert helps me learn') which will be provided one day/week per ward during implementation
- field-and-forum ('I learn the principles and then do it, with support') which might be provided through a number of 'academy' sessions to build a core underpinning skill set through experience-based learning
- action learning sets ('we get together to learn from each other') which might be half a day per month for all ward leaders within an implementation wave, facilitated by an expert coach
- classroom training ('the expert tells us how') which might work well for briefing people on specific Productive Mental Health Ward modules

For larger organisations, consider an academy model based around a series of experience-based interventions (eg, four day-long workshops for waves of ward leaders) to:

- set out the core methodology and practice which they will need to apply within the next month based on the Productive Mental Health Ward modules and tools
- agree the nature of support that ward leaders and staff are looking for from the expert coaches in the month ahead to implement the modules and apply the tools

- set aside time during the session for ward leaders to share learning and challenge each other
- in all capability building models, put the emphasis on practical exercises to build the confidence of participants (eg, practising a performance conversation based on the weekly data whilst standing around the Knowing How we are Doing board and then receiving feedback from peers)
- link Productive Mental Health Ward capability building into other programmes for nurses (eg, RCN leadership programme) to help participants make the connections

- invite members of the executive team and relevant stakeholders (eg, head of catering, materials management supplier, cleaning contractor) to capability building workshops to raise awareness and work on organisational issues
- develop mechanisms to share best practices within the organisation (eg, visual standards for linen cupboard available to download from a shared drive) to avoid inconsistency and wasted time

Options for spread

Having worked out what skills you require, you next need to consider how you are going to spread the Productive Mental Health Ward throughout your organisation. You will need to consider the following:
• how many wards do you have?
• what is your timeline?
• do you need additional financial resources and if so, what do you need to do to get these?

Start small and expand rapidly
Focusing on the showcase wards to learn Productive Mental Health Ward methods and allow improvement facilitators to develop Productive Mental Health Ward skills. Expand rapidly using ward staff from showcase wards to spread methods to the next wave wards. Spread is rapid but there is a challenge to ensure quality of implementation.
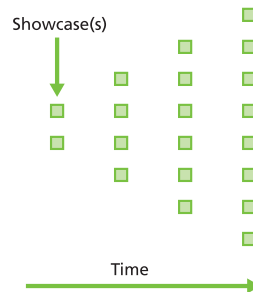
Start medium and expand in a linear fashion
A larger number of Showcase wards are used to learn Productive Mental Health Ward methods. This is dependent on internal and external capability. Spread is at a restrained pace but control of quality of implementation is easier.

Showcase(s)

Time

Showcase(s)

Time
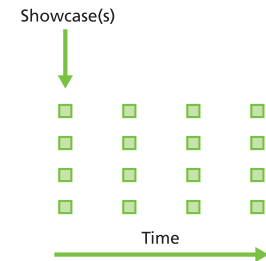
Spread the foundation modules across the trust

All wards do foundations   All wards do process modules

Time

Spread sequentially

Showcase(s)

Time

Starting small to allow learning by the project team and the showcase wards, spread is on a single ward basis. Ensuring quality of implementation but challenges to show impact on measures at a whole organisation level.
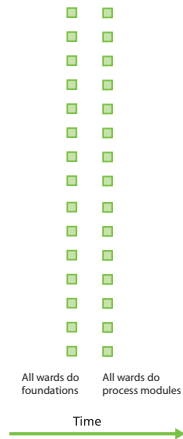
Spread is focused on implementing exactly the same thing across many wards. Working slowly but broadly. Implementing KHWD across all wards for example. This has advantages on consistent standards but challenges with engagement.

Spread planning is important

Clear definition of where you are beginning from, where your end point is and how you will evaluate progress throughout is needed to create a clear plan for spread. This aspiration can then be tested against the available resources.

Executive colleagues and board members should be challenged to sign up at the beginning to the full scale implementation and then ensure that the plan to achieve this is implemented.

Engagement spread

Engaged staff in multiple wards does not mean a successful spread of the Productive Mental Health Ward. The Productive Ward is a balance between engaged staff and robust processes. Engaged staff alone will not bring the gains.

Be sure to assess the quality and robustness of your implementation by using the tools available:
- KHWD measurement set, routinely updated at ward level
- robust ward processes: Productive Mental Health Ward healthcheck in each module
- audit schedule results: Toolkit
- feedback from senior leader visits: visit guidance sheets in Toolkit
- learning objectives complete: in each module

Actively request this information from the project leader.

Recommended reading:

The Machine That Changed the World: The Story of Lean Production

A detailed description of the Toyota Production System by some researchers from MIT. The book that coined and popularised the term 'lean'

*James P Womack,
Daniel T Jones, Daniel Roos,
Jan 2003, Harper Business,
ISBN: 0060974176*

The Toyota Way: 14 Management Principles from the World's Greatest Manufacturer

Thoroughly researched account of what drives Toyota's success which restores some of the balance between the production system and the management and people systems

*Jeffrey Liker, Jan 2004,
McGraw-Hill Professional,
ISBN: 0071392319*

Freedom from Command and Control: A Better Way to Make the Work Work

Thoughtful consideration on how to apply systems thinking and lean principles to the world of call centres and services, and the radical implications for how work is designed and managed.

*John Seddon, Oct 2003,
Vanguard Consulting,
ISBN: 0954618300*

Getting Things Done: The Art of Stress-Free Productivity

Simple and very effective framework for ensuring personal impact on your organisation is maximised through greater personal organisation.

*David Allen, Jan 2003,
Penguin Books,
ISBN: 0142000280*

Acknowledgements

Please view the enclosed:
Releasing Time to Care -
A short 10 minute introductory
DVD before reading this
module.

Your copy missing?
Or would you like to request
another copy?

Further copies of the DVD are
available from the NHS Institute
Productive Mental Health website
www.institute.nhs.uk/productive
mentalhealthward

Watch the DVD at least twice... you will pick out new things each time you view it

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute

Joanne Dawson 194.176.105.135
joanne.dawson@institute.nhs.uk
NHS Institute