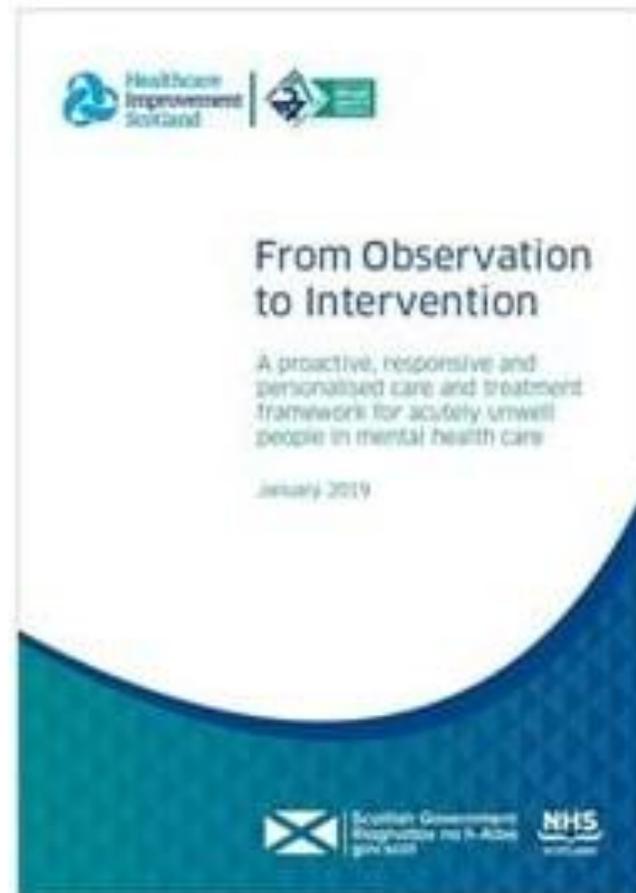


The NHS Tayside Mental Health Adult Inpatient Service changed the way observation was performed as part of the Improving Observation Programme (IOP)

The Scottish Patient Safety Programme – Improving Observation Practice (SPSP IOP) aims to extend and build on existing good practice in mental health services to provide an improved model of person-centred care.

In May of 2018 NHS Tayside joined the second phase of this programme and this case study, along with accompanying video [\[hyperlink\]](#) tells their story of their first year.



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“The general consensus from staff and patients is the ward feels safer”

Alisha Guild, Senior Charge Nurse, NHS Tayside

Our driver for change

In 2015, the Scottish Government committed to developing new observation practice guidance for mental health care in response to concerns about the effectiveness of observation policy and practice following incidences of harm and suicide whilst patients on psychiatric inpatient wards in Scotland where on enhanced and general observations.

The problem

The problems with the traditional approaches to observation practice are summed up by this quote from Graham Morgan at the Mental Welfare Commission. *“I remember just how lonely I felt, so many times, when I was on enhanced observation and the person assigned to follow me around, or sit beside me to protect me from myself, had nothing to say. Sometimes they just seemed to be uncomfortable to share space with me. There’s something terribly sad about that. When you’re at your most distressed and confused, communication can seem impossible.”*

What the ihub did

The ihub co-designed and published new guidance in early 2019. This guidance was informed partly by the service redesign efforts of 25 test sites. This case study tells the story of one of those sites, Murray Royal Hospital in NHS Tayside.

Background



The Intensive Psychiatric Care Unit (IPCU) was identified as our test site as it was an area with historic high levels of observations and represented the area of most opportunity to test new ways of working and learn at the quickest rate.

Approach



Work began in NHS Tayside in May 2018 with the appointment of an IOP clinical lead funded by the ihub. Improvements have been made using the following methods:

- Each ward designated a Senior Charge Nurse, Charge Nurse and Activity Leads to promote and support new processes.
- All wards aimed to provide a minimum of 17 hours of therapeutic engagement and activity (both planned and responsive) for all patients by the end of March 2020.
- Testing began in July 2019 Using a quality Improvement (QI) approach. All wards focused on improving structured activity and therapeutic engagement with patients.
- Activity recording tools were used to promote, support and record patient activity. These tools were run through a number of tests of change. Five patients were chosen per ward, each week to have their activity recorded, increasing to all patients by the end of March 2020.
- Wards were supported by weekly visit from the IOP lead and a local learning system was established between wards to share good practice.
- Person-centred care has been supported by involving patients and carers throughout the whole process, following the [Triangle of Care](#).

With thanks to all staff at Murray Royal Hospital and Carseview Centre for their participation in the video and case study

Impact



- **95% reduction in 1:1 observations**
This surpassed the initial aim of a 50% reduction.
- **Staff sickness reduced from 3,418 hours in 2017 to 1,169 in 2018**
These changes led to decreased staff burnout as measured by sick leave.
- **65% reduction in violence and aggression**
The change in therapeutic focus has increased safety for staff and other service users.
- **74% reduction in prone restraint**
Fewer instances of prone restraint (when someone is physically prevented from moving out of a restrained position) improves service user experience.

More information



Visit the [IOP webpages](#) to find out more about Improving Observation Practice.