What is Safewards?

Len Bowers
Professor of Psychiatric Nursing and team
What is Safewards?

- A model explaining variation in conflict and containment
- An experimental trial of ten easy interventions based on the model
- An additional 30, 100 or a creative infinity of interventions
Safewards model
simple form

Staff modifiers

Patient modifiers

Originating domains

Flashpoints

Conflict

Containment
The Safewards Trial - design -

- Included: Generic acute wards, PICUs, Triage, Assessment, Treatment.
- 2 randomly chosen wards at each of 15 randomly chosen hospitals in SE England (42 eligible hospitals in consenting Trusts within 100 km central London)
- At each hospital, wards randomly allocated to experimental or control conditions
- All randomisation and analysis independent
- Single blind Cluster Randomised Controlled Trial. Wards and their staff blind as to which was the experimental and which the control intervention until after the study
- 8 weeks baseline data collection, 8 weeks implementation, 8 weeks outcome data collection
- Primary outcomes: conflict and containment via PCC
The 10 Safewards Interventions
Clear Mutual Expectations
Soft Words

**SAYING NO**

- Sympathise
- Attend & Listen
- Yes is best!
- Identify with patient
- Never forget a promise
- Give good reasons

- Not always right
- Options

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Be flexible. Talk about any task you want a patient to do. Explore the patient’s point of view, so that they can feel heard and valued, and so that the timing or precise content of the task can be adjusted to suit their wishes. Understand the blocking factors and find workarounds and compromises.
Reassurance
Mutual Help Meeting

[Images and information related to the Mutual Help Meeting, including a poster and a photo of a staff member.]
Bad News Mitigation
Calm Down Methods

On Cove ward we aim to do things differently!!

The Chill Chest

Rachael Appleby (Staff nurse)
Dave Wootten (Nursing assistant)
Discharge Messages

Always look forward, not back. Things can only get better with the help given by the staff here and talking helps too.
Talk Down

[Images of a poster with 'TALK DOWN TIPS' and 'KING'S College London', 'South London and Maudsley NHS Foundation Trust', and 'Institute of Psychiatry at the Maudsley']
Know Each Other
Implications of the Safewards Model

• Causality is complex with multiple, overlapping and interacting factors involved
• No single miracle answer to the problems of conflict and containment
• Some causal factors are outside the control of ward staff, some are outside the control of anybody
• There will be no complete answer to the problems of conflict and containment
• Strengths: identifies patient modifiers; ideas engine
• Weaknesses: over-inclusive; biased to own research
Main outcomes

CONFLICT
14.6% decrease
CI 5.4 – 23.5%
p = 0.004

CONTAINMENT
23.6% decrease
CI 5.8 – 35.2%
p = 0.001
Why do it?: Strong fit with nursing identity

- It’s really good to see so many people so enthusiastic and motivated. It's really got our team talking.
- There's been a real buzz on the ward, I think people really get it.
- It’s not rocket science and it makes so much sense. It’s simple.
- Very interesting. It’s basic stuff that is actually useful and raises questions for us about actions and interventions.
- This could potentially flip everything on its head and make things much better.
- I feel a little bit excited by the evidence which shows it works. I hope members of my team recognise this.
- It's common sense and it makes you think about what you do and how that helps.
- Very interesting. It’s basic stuff that is actually useful and raises questions for us about actions and interventions.
- This is our chance as a team to think about what we do and start to try new approaches together.
- It’s nice to see people buzzing from this and so motivated.

South London and Maudsley NHS Foundation Trust
Institute of Psychiatry at the Maudsley
“This meeting has been empowering as has enabled people to use skills and qualities which may sometimes get lost as a result of admission to hospital. It has enabled us to take a lead in supporting each other; hospital sometimes lends itself to processes which are done to or for us so this meeting brings more balance. The helping each other meeting has helped to reduce some of the fear which is felt upon admission and has led to people feeling more embraced within the ward community straight away and gives time to verbalise and talk about admission from a peer perspective. Through the meeting we are sharing understanding and support from people who may share similar experiences and perspectives of being patients within the ward. Helping each other is something which everyone does and is a natural part of ward life; through giving this a formal forum we have opened it up to all of the ward community.” Mark, Avocet Ward
Formal economic analysis

- Staff time (alone) saved via Safewards: £88,384 pa (95% CI £88,096 - 88,725) at 2013 prices = €110,261
- £63,915 conflict reduction, £24,470 due to less use of containment
- Cost of implementing Safewards £4,951 per year = €6,176
Safewards sources

- Dedicated website: www.safewards.net
- Twitter feed
- LinkedIn group
- Facebook Group
- Youtube Channel

All free. Audit not mandatory. Permission not required. Take and use!
Longer term Safewards outlook

• Implement the ten. Refresh the ten
• Add and/or substitute additional interventions periodically
• Wards to be permanently and continuously engaged with Safewards, one way or another
• Revolutionary change to 5+1 PMVA training:
  • Streaming
  • Personal development plans
  • Close linkage between training and supervision
  • Emotional management training/therapy
• Nurse Education: similar direction via much closer, targeted and effective education, clinical experience and supervision. New education methods and new technologies shaped to deliver more advanced nursing.
• Research: much more on the clinical skills of nurses and into communication beyond the basic
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