

Current state analysis of Section 136 suites

Louise Blakley HEE Quality Improvement Fellow 2019/20

1. Aim

INITIAL - To improve the Section 136 suite experience for service users

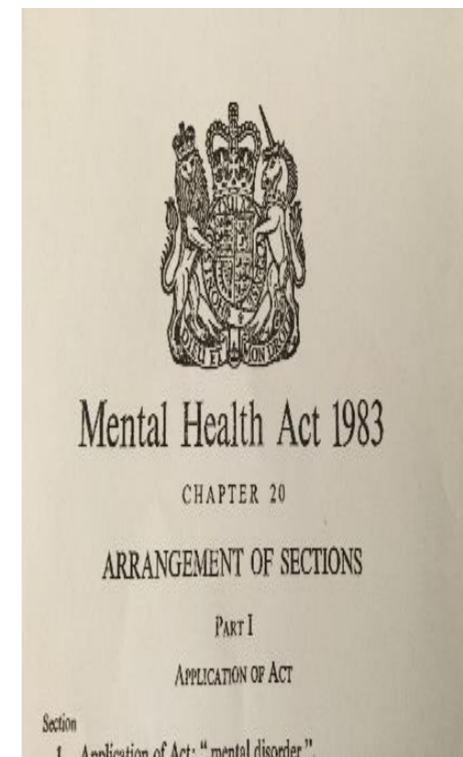
Through examining care within Section 136 Suite (Antelope House) and using workshops to share and plan improvements with staff

FINAL AIM - To collect data through quality improvement methodology to inform S136 service development

As project was paused before workshops happened, the aim of fellowship was adapted to sharing the current state analysis of S136 suites. This poster shows using QI methodology to examine the S136 suites highlighted different areas for improvement (the initial assumptions in speech marks section 4).

2. Background

- Section 136 is police power
- Concerned about a person's mental health
 - Taken to a suite within a health setting
 - To be interviewed by a special mental health professional and a doctor.
 - Can detain member of public for up to 24 hours



In Southern Health NHS Foundation Trust (SHFT), there are three suites and a recent Care Quality Commission report raised areas for improvement. My recent research study¹ found mixed patient experiences in these suites with one person being very distressed about how she was treated. These patient experiences motivated me to apply for this fellowship.

3. Data collection



Observations – I spent over 26 hours observing eight patient's care and their experiences in the suite



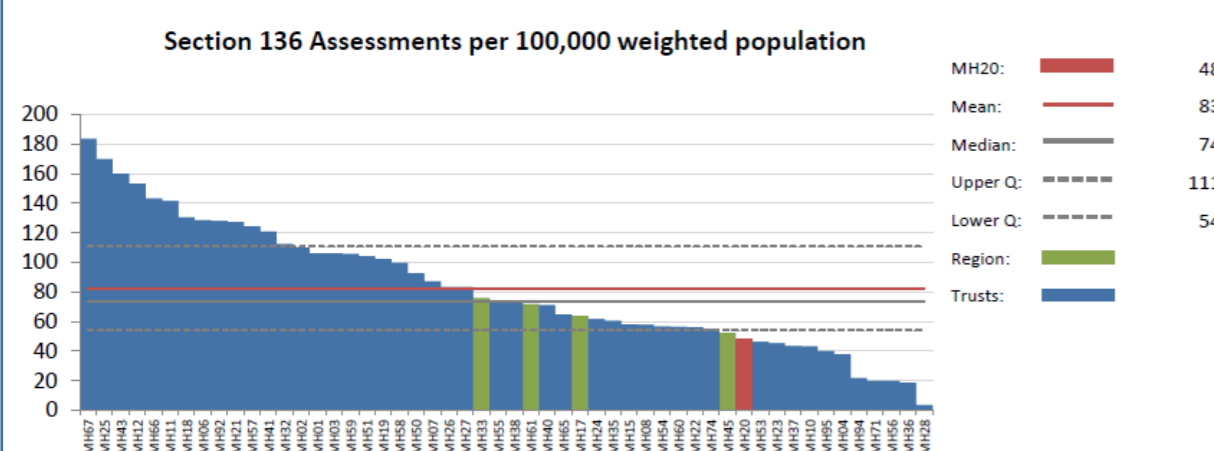
Meetings - 19 different staff from all levels of SHFT and other organisations involved in S136 process.



Data – collected from different organisation paperwork and electronic patient records

4. The QI project provided data to inform service changes

"Too much use of s136"



This chart shows national data by health authority of amount of s136 and red represents SHFT and shows SHFT does not have high amounts as within lowest 20%

"The environment needs big changes"



One example of small changes that nursing staff are making, using 5 S method, to improve patient's environment in S136 suite.

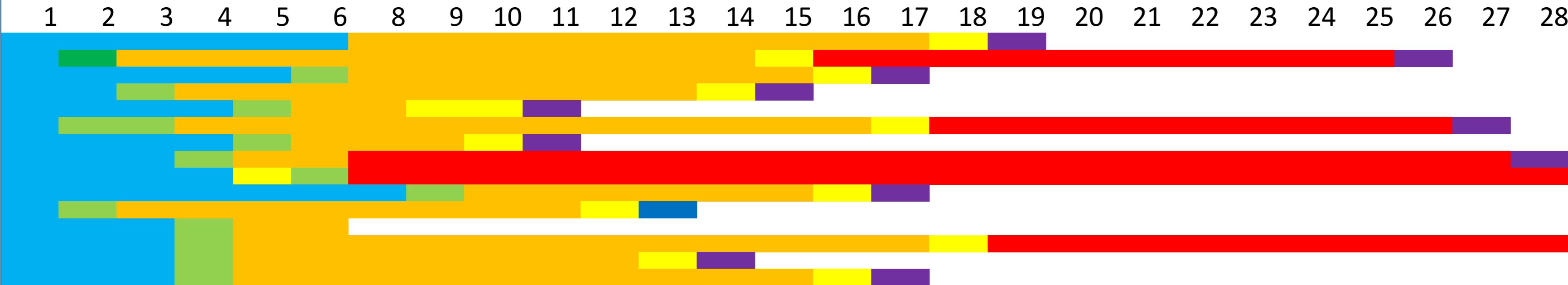
New issues that QI methodology highlighted

Medication – no clear process compared to inpatient units...

Lack of staff knowledge and confidence about legal issues

"like being in a black hole with people staring at you" - effect of constant observation

"Our breaching of 24 hours is all about finding beds"



Graph of 17 patient journeys through S136 process

It shows that significant delays (orange) waiting for the interview (yellow) as well as long periods with bed delays. Focusing on reducing the wait times for interview could reduce illegal detentions over 24 hours.

5. Sustainability

In this project, sustainability involves data sharing about the current state to be used for service improvement through:

- Key interested and informed staff
- A trust wide plan for improvements in S136 suites and processes.
- My potential role to coach staff involved and attending trust wide S136 forum, governing these service improvements.

6. Lessons learnt

The project taught me:

- how key encouraging staff to be interested in QI at all levels and how to engage staff that do not know you
- the importance of liaising, sharing and engagement on all levels of organisation



Personally I learnt:

- how to gain impact with different people
- how good I am at sharing my knowledge and QI
- a love of data and presenting it colourfully and simply

OUR VALUES



References;

1. Blakley (awaiting publication date) Waiting for Verdict: Service user experiences of Mental Health Act assessments. Journal of Mental Health.

EMAIL: Louise.Blakley@southernhealth.nhs.uk

TWITTER: @louise_blakley