Focus on Specialist Dementia Units: June 2018
Balmore Ward, Leverndale Hospital, Glasgow City Health and Social Care Partnership

Introduction
This paper sets out a summary of improvement work being undertaken in collaboration with Balmore Ward, Leverndale Hospital. This work was commissioned by Chief Nursing Officer Directorate at Scottish Government and is being led by Focus on Dementia, the national improvement programme for dementia in Scotland, based within the ihub of Healthcare Improvement Scotland. Focus on Dementia are working together with the team at Balmore Ward and national partners including Alzheimer Scotland, NHS Education for Scotland, Scottish Care and the Care Inspectorate.

Background and Context
Balmore Ward is a Specialist Dementia Unit managed by the Older Peoples Mental Health Services in Glasgow Health and Social Care Partnership. Balmore Ward is an assessment ward and patients are admitted for assessment and treatment of stress and distress related to a diagnosis of dementia. As an assessment unit many of the admissions are via the Community Mental Health Team, care homes, other psychiatric hospitals and general acute hospitals. The ward has 18 beds and is split into two with two single sex areas of the ward. In 2016, Balmore Ward was selected as one of the four demonstrator sites for the national programmes supported by the Focus on Dementia team.

Understanding What Matters
Demonstrator sites have used the Experience Based Co-design model to help them identify improvement priorities relevant to their local context. A range of participatory approaches, including patient observations, interviews and co-design events have been undertaken to identify areas for improvement which matter most to people with dementia, carers and staff. The advantage of using this model is that staff, patients and carers will identify the areas which matter most to them, therefore promoting greater engagement and support for changes and improvements which will ultimately lead to longer term sustainability. By supporting staff to improve their knowledge and skills in participatory and improvement approaches, they will be able to continue to use these skills as part of everyday improvements in practice.

Experiences of Staff working in the Unit
Christine Murphy (Chair of the Implementation Group and the Service Manager for Older People and Primary Care) and Steven Conlon (Senior Charge Nurse) have shared their experiences of the work to date.

"The implementation group has been key to taking forward the work of the programme and providing a forum for discussion with the wider team. 'The work has been owned by the staff…' with *'…senior clinical and managerial support for the work'.*
In terms of capturing the experiences of carers, the implementation group has been working with the voluntary sector to find ways of engaging carers in the ward environment in small groups or on a one to one basis. Much of this feedback has been very positive.

Staff from Balmore Ward

Christine commented *'the range of positive feedback from carers has been just as beneficial to the service as the identified improvement areas'*. In addition, Steven commented *'…when staff heard positive feedback about performance and quality of care from Senior Managers present in the same room as them, this was experienced by staff to be highly rewarding and motivating'.*

Stephen reflected on the process of completing the staff interviews. This enabled everyone *'to hear the challenges and rewards… within the ward and the expression of ideas and themes for quality improvement'*. However if we were to do this again, we would consider different ways of capturing this. For example, how we look at how we shared transcriptions with staff as some of the methods used e.g. word clouds were not that helpful to assist with understanding.

Both Stephen and Christine agreed that the observations were an important part of this process. Christine explained that *'…the observation process within the model has been to me the most enlightening part of the experience giving staff time to observe others practise and reflect on what they saw…'.* One of the key challenges in this work has been capturing the experiences of patients with advanced dementia. Stephen reflected that observations helped overcome this by *'getting as close to the experience as we could achieve'*.

Following the co-design event, based on the experiences identified by staff, carers and the practice seen during observations, it has been decided to focus on **meaningful activities** and **communication with relatives and carers** as the starting point for improvements.

The staff from Balmore Ward

Both Stephen and Christine have highlighted that this work has been resource intensive but acknowledged that it has given us detailed reports from staff and carers. Christine explained *'we have identified key themes that can be taken forward and improve the care within the unit'.*
In conclusion Stephen explained *'Overall, I found the process to be both challenging and rewarding. It has provided the team with a structured support to quality improvement and I am hopeful that by utilising the process and maintaining audit and feedback loops we will be able to sustain change and improvement on the longer term and embed this approach into practice'.*

Conclusion

This programme has used innovative person centred approaches to identify meaningful changes that respond to the local challenges and improve patient, carer and staff experiences. It is now embarking on the next phase using the model for improvement to implement identified change ideas. Focus on Dementia team at the ihub of Healthcare Improvement Scotland, in conjunction with NHS Education for Scotland, Alzheimer Scotland, The Care Inspectorate and Scottish Care, will continue to work with all members of the team in Balmore ward.

Appendix One: Experience Based Co-design Methodology in Practice in Balmore ward

Stage 1: Establish Steering Group
Steering Group chaired by Christine Murphy (Service Manager- Older People and Primary Care, Glasgow City Health and Social Care Partnership). Membership includes full MDT, external partners & carers

Stage 2: Staff Interviews
15 staff interviews undertaken by team from Healthcare improvement Scotland with questions agreed by the steering group. Transcripts prepared and themed. 13 themes identified.

Stage 2: Observations
Day in the Life of Balmore undertaken with observations completed by staff over a continuous 24 hour period. Following theming, 9 key themes emerged from the observtaions.

Stage 2: Carer Interviews
Carers engaged on the ward from the outset of the programme by the Mental Health Network and the Community Engagement Manager and a garden party held. Overall 30 carers shared their experiences.

Stage 3: Staff Event
Staff were involved in theming the staff interviews and the observations and highlighted areas for focus.

Stage 3: Carer Event
Working with the Community Engagement Manager and the Mental Health Network, a small group of relatives and carers reviewed the what carers said and prepared a summary report

Stage 4: Everyone Together
Staff came together and reviewed the observations, what staff had said and the recommendations from carers. Carers, external partners from the voluntary sector and universities were also involved. From this key improvement themes emerged.

Stage 5: Codesign Groups
Priority 1: Providing access to meaningful activity

Stage 5: Codesign Groups
Priority 2: Improving communications with staff and carers including handover and better information for carers

Celebration Event
Planning for the celebration event to be undertaken