



Safety Planning Intervention – The Journey so far

Development phases

- Three pilot phases supported the design, resources and training requirements to complete the intervention. A poster was developed and shortlisted at the *Patient Safety Congress (Manchester 2016)*
- Recommendations from the pilots suggested training was required to support and orientate practitioners, future electronic development of the plan would be beneficial and service user experience was positive both about the intervention and alliance with the practitioner.
- Qualitative data was collected via semi structured interviews to gain service user and staff experience of using the plan. Key themes included *better working alliance, increased insight, emotional and meaningful and very person centred*
- Administration of the adverse effects questionnaire (adapted) showed no significant adverse effects of engaging in the safety plan intervention.
- The inclusion of focus groups to capture staff experiences highlighted themes such as *“its what I came into nursing to do”*
- The design and training package was finalised ready for a more broader implementation phase completed between July and November 2016

Early Implementation

- The first phase of broader implementation included four sites two inpatient wards and two corresponding stepped up care teams. A service evaluation element was included to capture impact on emotional coping, locus of control and working alliance. Adverse effects questionnaire was repeated. Pre and post implementation staff focus groups were also included to learn from the implementation process. Areas for concern questionnaires were administered to ascertain whether concerns staff had prior to implementation were realised in the implementation process. A thematic analysis was completed as with other phases to capture key themes. It was successfully implemented in three out of the four sites

Outcomes

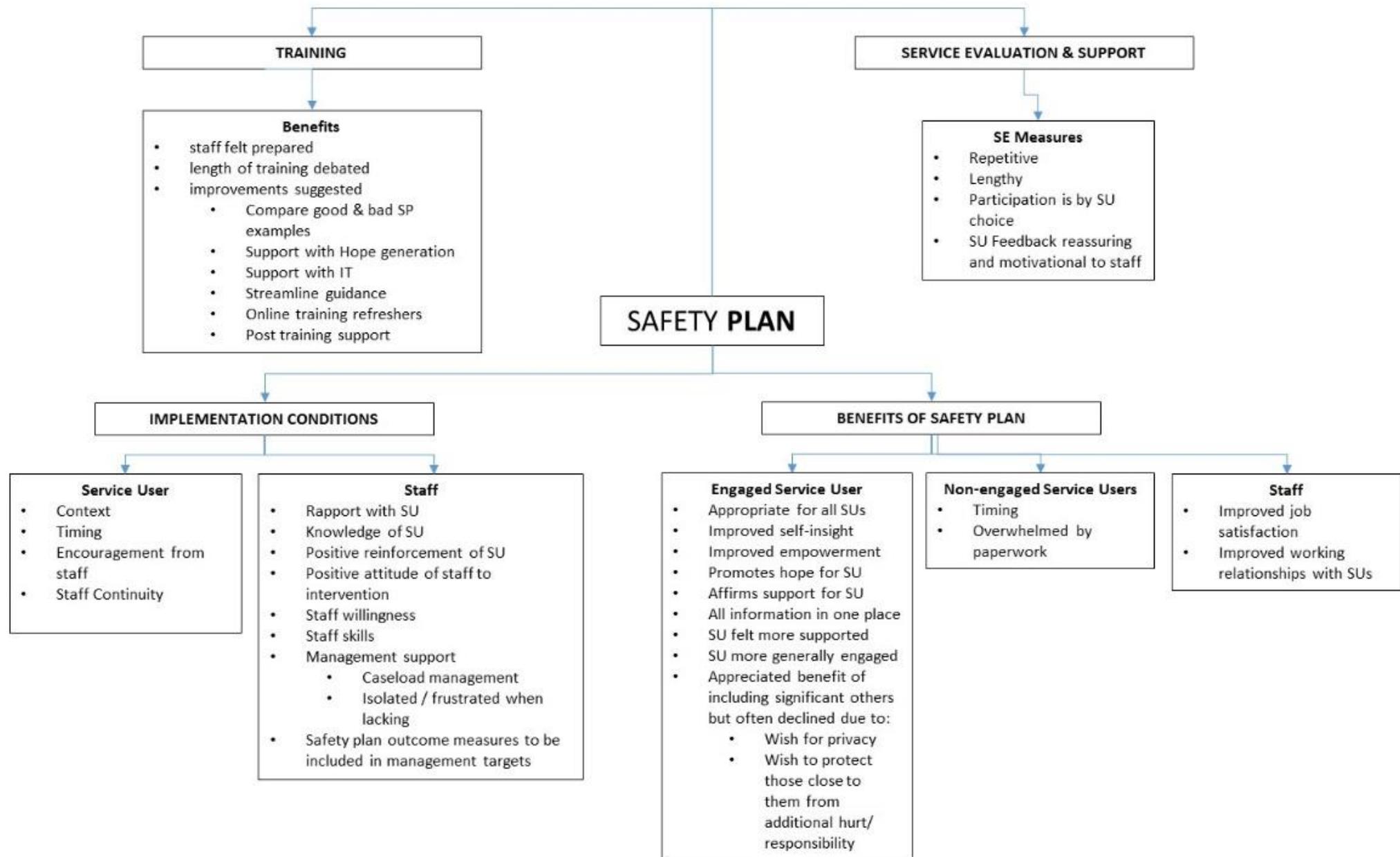
Full service evaluation report is available from perfect care complete with executive summary

Staff outcomes

- Considered that the safety planning intervention provided an intensive, collaborative and personalised intervention over and above existing clinical practices.
- The intervention provided a defensible, formal structure to their clinical practice which was valued.
- Staff felt adequately prepared and made some excellent suggestions for improvements including e-learning resources
- Engaged staff noted improved job satisfaction despite having initial reservations post implementation they were keen advocates.
- Service user engagement was influenced by staff attitude
- Concerns noted prior to implementation were not realised within the implementation process .

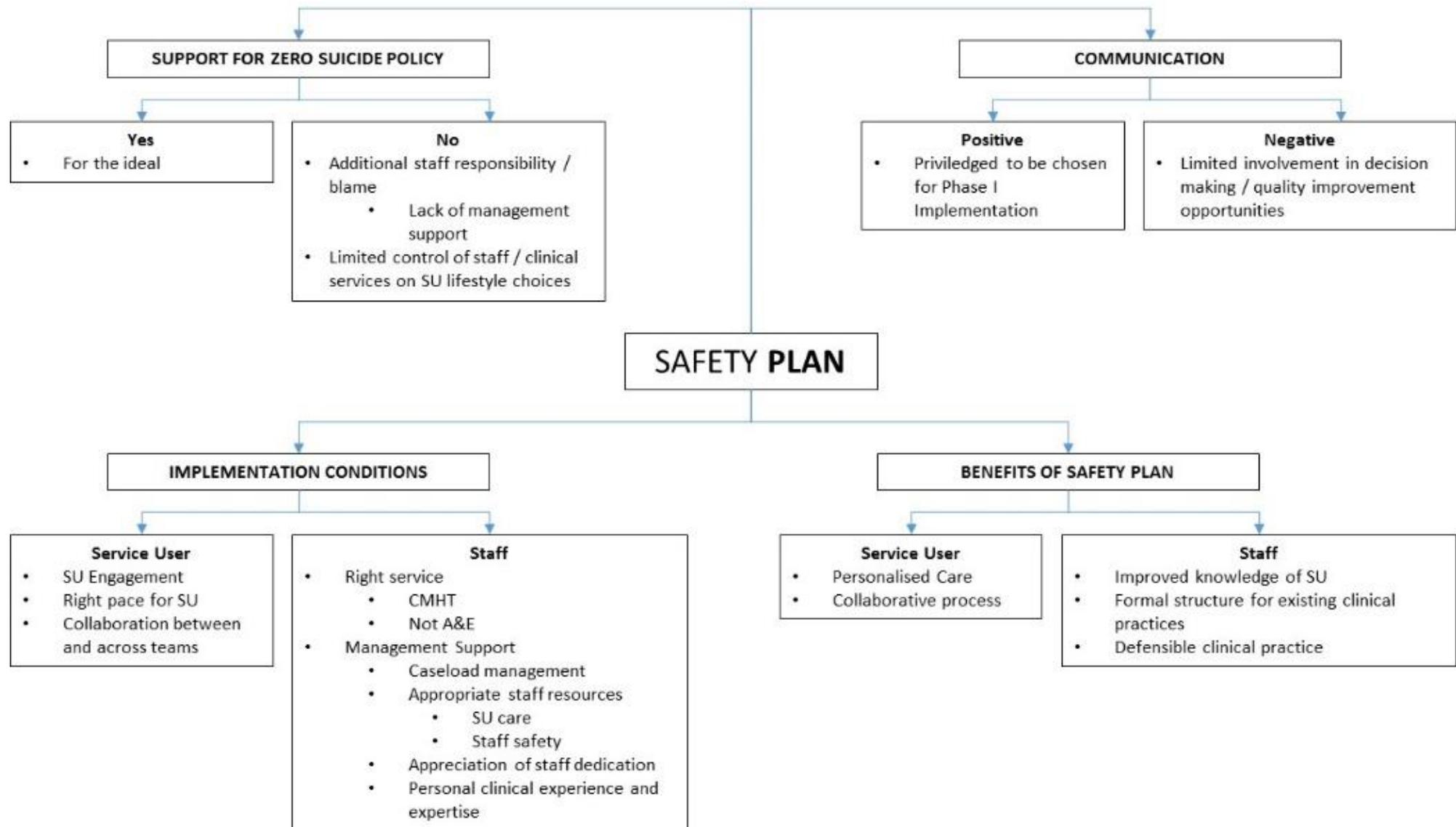


POST-IMPLEMENTATION STAFF DISCUSSION GROUP THEMES





PRE-IMPLEMENTATION STAFF DISCUSSION GROUP THEMES





Service user outcomes

- Safety planning is appropriate for all service users although the timing of when to engage service users should be led by service user choice
- Service user feedback confirmed their interest in and willingness to engage in the intervention.
- Service users expressed validation of feelings as well as improved clarity and control over negative thoughts and feelings. They reported feeling more able to deal with these following the safety planning intervention and therefore more hopeful and self reliant.
- Measures indicated an increase in sense of locus of control pre and post intervention, an increase in ability to cope with emotions and varied working alliance experiences.

Trust Outcomes

Whilst these were relatively modest given the three month time frame of implementation they indicated a positive direction. Highlights included

- **Zero % of** service users who were discharged with a safety plan were readmitted within a 90 day period
- There was a reduction in the number of complaints from service users within inpatient setting whilst the safety planning intervention was being implemented

Implementation learning and recommendations

Perhaps one of the most valuable aspects of broader implementation of the safety planning intervention was the highlighted future recommendations and identification of challenges and opportunities. These are documented more fully in the evaluation report.

Key aspects included

- That the intervention can be implemented within our inpatient settings, however strong leadership, management support and creativity around division of tasks and caseloads to support staff in completing the intervention
- Crisis points for service users were not ideal times to engage service users from both service user and staff perspectives and therefore A and E services in its current service structure would not necessarily be an appropriate place to focus the safety planning intervention in its current form. However if brief interventions are to be included within the overall service model then the SPI would be extremely relevant
- IT support and development would be beneficial for future implementation to facilitate the intervention (consistent with previous pilots)
- Integration with the learning strategy and supportive e-learning resources was recommended
- Future implementation sites would benefit from weekly support sessions post training to enable and support staff and ensure quality of the plans produced

- The SPI is firmly embedded within our data reporting system and future audit would be recommended. We are continuing to collect data and have seen a 50% increase in the number of plans within our system in the last two months.
- The safety plan intervention in its current form is unique and sufficient as is to apply for a research funding bid for patient benefit (RCT). The intervention has attracted interest from both Manchester and Liverpool university and the intellectual property and resources allow future income generation for the Trust.

Future development

We are currently working on a strategy for future implementation for our next PDSA cycle in March and April 2017. Many thanks to research assistant Helen Mulholland, to the committed service users and staff who co-designed the plan and to the dedication of the successful implementation sites.

