Putting patients first -
The Productive Series
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I am pleased to write the foreword to this document for some relatively personal reasons as follows:

Putting patients first demands a personal approach. The Productive Ward allows staff the space and time to deliver the kind of care that many individuals want to give when they work within our communities, hospitals, GP practices and children’s and adult services to name a few. Many of those individuals are our family members, friends, colleagues and people from whom we have received care. So let’s support them in turn to support us, as people using services and receiving care.

Secondly, whilst personally using services and visiting various care settings throughout England I continue to be humbled by the attention to detail and mutual respect that I sometimes observe where patients, carers and users work together with caregivers to enhance the quality of life for individuals. This needs to be the case for everyone. From the patients point of view, the small things matter just as much as the highly complex and necessary aspects of care. As you will read in the attached case studies, the intelligent and constructively critical observations of those receiving care can be as empowering as the letter of thanks motivating staff on an entire ward.

Finally, our ability as a health and social care service to deliver better, relevant personal care to each individual within our diverse populations must be achieved by listening to people using our services, using such information to make relevant decisions, and feeding back consistent clear information to individuals and communities in a way that makes sense to them. More joint working with small, locally based community organisations would also help to meet this outcome.

I would therefore recommend The Productive Ward as one of the tools assisting staff and communities to deliver a high quality of service to individuals through a personal approach that ensures the best outcomes for all people using services.

Joan Saddler
National Director Patient and Public Affairs
Department of Health
Introduction to this guide

Healthcare in England is facing unprecedented challenges. Patients quite rightly expect to be well cared for by the NHS across all healthcare settings. Care should be high quality, focus on the patient and be safe. However, recent publicity has highlighted that in some cases these goals are not met. In addition, patients and carers may be anxious that the current financial pressures might affect the care they receive.

The NHS Institute for Innovation and Improvement has been working with a wide range of NHS trusts to improve patient care. By implementing programmes from The Productive Series, trusts are making a real difference to the quality of patient care. The programmes help organisations to ensure that safety, quality and positive patient experience remain priorities in these challenging times.

This document shares case studies from NHS trusts who are implementing The Productive Series. Each example highlights good practice that is improving care for patients. It is aimed at patients, carers and staff and can be used in a variety of different ways. It will help:

- **patients** and carers to understand how The Productive Series can improve their care and give some examples of good practice
- **staff** to understand where best practice is being delivered and apply it to their own work, and how The Productives Series can be used to improve the patient experience.

We have used graphic icons (see page 8) to identify where key themes occur in the case studies, so you can pick out the areas of most interest to you.

Ten of the leading health and social care organisations in the voluntary sector worked with The King’s Fund, a charity that seeks to understand how the healthcare system in England can be improved, to identify what the health and social care system must do to meet the challenges of the future. Their findings were published in the report “How to deliver high quality, patient-centred, cost-effective care” in September 2010. Important priorities emerged from this report, including the need for co-ordinating care and engaging patients in their own care.

The Productive Series helps to deliver these priorities. The programmes also focus on improving safety and quality in care and on reducing time wasting activities so that nurses can be more focused on time with the patient.

These priorities all fit with the Government’s overarching aims for the health service in England, which are about Quality, Improvement, Productivity and Prevention (QIPP, for short). Implementing The Productive Series across all NHS settings by 2013 is one of the QIPP goals.

In January 2012 David Cameron set out a range of initiatives and actions that would improve patient care. Implementing The Productive Series, or Releasing time to care™ programmes was a key message from the Prime Minister.

The range of Productive programmes focus on improving the quality of care. Each programme supports trusts to meet essential standards of care set out by the Care Quality Commission. The Care Quality Commission works to ensure that all trusts are delivering safe, high quality care that meets the needs of patients.

All of the examples here are real-life improvement initiatives at various stages of development and implementation during 2011. We would like to thank the organisations involved for sharing details of their successes and challenges, which help us to see how the healthcare system of the future can deliver excellent care.
The Productive Series

The Productive Series (sometimes also known as Releasing time to care™) is a series of service improvement programmes developed by the NHS Institute for Innovation and Improvement for different care settings (for example hospitals, operating theatres or community settings). Implementing the programmes involves all grades of staff to make changes that improve the quality, reliability and safety of patient care.

The Productive Series helps staff to identify time wasting activities, duplication and inefficiencies, so that teams can stop doing things that are wasteful and take time away from caring for patients. Through delivering The Productive Series in many trusts across the country, we have found that simple things like protecting meal times, working with patients individually on their care plan, protecting drug rounds, preventing interruptions at staff handovers and streamlining discharge processes have reduced errors, improved safety and helps patients to get the care that they need in a timely way with the right support. On average staff have freed up to 20-30% of additional time. This can have a huge impact on improving the quality of care for patients. Trusts typically use this extra time to focus on important improvements including:

• safety and infection control
• improving nutrition and hydration
• better co-ordinated care across departments
• more focused time with patients and their families
• improving ward and medicine rounds
• using theatres better to reduce waiting lists.

Organisations have found that by improving the quality of patient care, they can prevent avoidable harm, increase the quality and reliability of care and engage patients and carers more in their own care.

The case studies featured in this document provide a range of examples showing how organisations are using The Productive Series to meet the needs of patients and healthcare fit for the future.

You can find out more about The Productive Series by visiting www.institute.nhs.uk/productives

Many organisations who have implemented Productive programmes, have made significant improvements for their patients. On the following pages you will see many inspirational stories, which demonstrate how they have achieved this.

Below is a key summarising the type of benefits that have been achieved.

Co-ordinated care
Programmes from The Productive Series encourage a co-ordinated approach to patient care. This delivers more proactive care, with minimum disruption and delays and a better experience for the patient.

Improving quality and safety
The Productive Series can help deliver care in a more systematic, standardised and patient focused way, enabling better quality and safety for patients.

Improving patient experience and involvement
The Productive Series can help organisations to understand what their patients think of the care they receive. They encourage patients to become more actively involved in understanding and participating in the delivery of their care.

Releasing time for better care
By making processes more efficient, programmes from The Productive Series help staff to release time that can be redirected to patient care. This helps improve the safety, quality and reliability of that care, and patient experience.
## The Productive Series case studies

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The Productive Ward is made up of these modules. They are worked through systematically by each ward team, who look at the improvements they can make in their areas of care.

Birmingham Children’s Hospital NHS Foundation Trust

Putting patients at the heart of The Productive Series
Birmingham Children’s Hospital regards patients as a vital part of its healthcare team and, since it began implementing The Productive Ward in 2009, it has involved patients in all aspects of service improvement. The programme has now been rolled out across almost every ward and care environment and both the results and the patient feedback are excellent.

Janette Vyse is the Lead Nurse for Participation and Patient Experience at Birmingham Children’s Hospital. She is an advocate of making sure that patients and carers are involved in their own care and that their views about improvements across the hospital are listened to and acted on. She also believes that patient experience information should be a core principle of their care and not regarded as an “add on”.

Janette describes how staff at Birmingham Children’s Hospital have been encouraged to build protected time into their shifts to talk to parents, carers and patients about their experience. “It’s not just about hearing and acting on any complaints and comments,” she says, “it’s about building trust with carers and patients. If we take the time to listen to how they are feeling, they know that we value them. Parents feel safe leaving their children in our hands.”

Child and Adolescent Mental Health Unit
Led by Ward Manager, Paul Smith, the Trust implemented The Productive Ward programme on its Tier 4 Child and Adolescent Mental Health Unit. Engaging young people is already a strong part of the ward team’s ethos and staff saw this as an opportunity to develop this further.

The team started by consulting young people, to involve them in the Productive programme from the outset. Young people provided feedback on their experiences as patients, and how they wanted staff to use any additional time released as a result of The Productive Ward improvements. Suggestions included time spent improving the groupwork interventions and exercise activities off the unit. The young people were quick to get involved with the programme and added their unique perspective in identifying where time was being wasted and how processes could be improved. They helped to present results to the senior leaders in the Trust.

The young peoples’ suggestions were listened to and acted upon. The young people felt that their recovery would be enhanced if they were able to get more activity - especially outdoors. Amongst other improvements, the Trust has purchased mountain bikes and the staff team now take groups of young people for outdoor exercise away from the unit.
Young people were also involved in looking at the roles and responsibilities of each member of staff. This information was then included in the ‘welcome book’, which is given to each new patient and their family prior to admission. This book helps young people and their families to identify who to approach in a particular situation, which saves time and reduces the feelings of disempowerment associated with ‘waiting for an answer’.

Paul Smith, Ward Manager, talks about some of the other benefits that he has observed through The Productive Ward programme; “In the past 18 months, there have been no serious untoward incidents. The need for one-to-one nursing observations has reduced. We have had fewer young people absconding from the unit and incidents of self-harm have reduced. On site school attendance has increased. The programme has been a great success.”

The Trust believes that The Productive Ward has helped it to make far-reaching and lasting improvements in its services for children and young people. Deputy Chief Nurse, Rosy Rogers comments: “Staff responded well to an active approach to improving patient care that was not “top down”. Productive Ward gave them permission to prioritise being with patients.”

Patient governors, senior staff and young people at Birmingham Children’s Hospital have started doing monthly quality walkabouts. The walkabouts can be anywhere in the hospital, with any ward or team. The aim is to focus on quality by spending time on the wards to get a picture of what is happening at the frontline of care, and to talk freely with those experiencing that care.

Rosy, comments on her walkabouts on the Child and Adolescent Mental Health units. “We were shown around the unit by the young people who were using the service. They pointed out the things that they liked and the things that they wanted to change. By involving the young people in implementing The Productive Ward in this environment, they had really understood the day-to-day care on the ward and had clear ideas about what they wanted to tell us about their experience. Their opinions matter to us. The ward staff have worked really closely with the young people to make some significant changes.”

“In my opinion ward walkabouts are of great value to both the hospital and the people actually performing the review... I think that walkabouts are a quick and practical way for the hospital to gain valuable in-sight into how service users (both patients and carers/visitors) view and experience the hospital.”

Patient Governor and member of the young person’s advisory group (YPAG)
Improving medicine rounds

As part of The Productive Ward Medicines module, the Trust has started implementing bedside drug rounds, rather than the more common practice of making up drugs and prescription combinations in a staff area. The idea is to give patients an opportunity to interact and ask questions.

During the drug round, staff wear red tabards to indicate that they are distributing drugs and are not to be interrupted unless it is an emergency. This is essential in reducing errors and avoiding harm events. It also means that staff have an opportunity to focus solely on the patient receiving the medication. This uninterrupted time allows for a longer conversation with the patients and carers about their medication and about any worries they might have. It gives staff an opportunity to discuss and deal with pain management at the same time.

Rosy explains that the system has made a real improvement to the pain assessment and monitoring processes and that the feedback from patients has been really positive. “Instead of getting medicine delivered on a tray as part of a long list of medicine handouts, we now have two nurses discussing medicines directly with patients and carers at the bedside four times a day. It has made a huge difference to the interaction between staff, patients and carers, it really helps build positive communication.”

Janette and Paul have been working with The Productive Ward programme lead to ensure that the good work of the programme is fed into the wider Trust.

“I can tell what kind of care my child is going to get within 15 steps of walking on to a ward,” one parent commented. This comment inspired Birmingham Children’s Hospital to move into the next phase of service improvement. The Trust is challenging its patient governors and service users to take 15 steps into a ward and to feed back how it made them feel - what kind of care would they expect to receive here? Are the staff friendly and welcoming? Does the ward feel calm and well managed even if it’s busy? Is the environment clean and tidy? Is there evidence of good interactions between staff and patients?

The Trust is excited about this new challenge. “It will help us understand by hearing directly how children, young people and carers see us when they first arrive and think through how we start our care journey together with high expectations and trust,” says Janette Vyse.
A ward vision for patient care
Papworth Hospital began The Productive Ward by getting staff together to create a vision. All ward staff got involved in developing the vision, which described the care that they wanted to deliver every day on their ward. Everyone had a chance to put forward their views as it was important that everyone had ownership of the vision. From a wealth of ideas generated, the vision was refined to six key points the staff team wanted to demonstrate every day in the care of their patients.
The vision was displayed clearly at the ward entrance and in several other prominent places. It was supported by information about the ward ethos that was displayed for patients and carers to see. Beccy Maslin, Clinical Trainer, helped lead the creation of the ward vision. Beccy said, “Getting everyone to focus on our vision was important. We worked hard to get everyone on the ward team involved, because this needed to be OUR vision. It was also really important to display this information to remind our staff and inform our patients what we aspired to deliver.”

The Chief Executive of the Trust received a letter from patient Rob Marchment about his stay on the surgical unit. Rob explained that during his stay, he had noticed extensive information about the ward vision, The Productive Ward programme and the planned improvements. He took the time to highlight each area of the ward vision in his letter and explained how he had seen the ward staff delivering their vision while caring for him during his stay on the ward. He commented that “it was possible to connect all the aims to what was being lived out on a daily basis on the ward.”

To read Rob’s story visit the Case studies page at www.institute.nhs.uk/productiveward

The staff team were delighted with Rob’s feedback. Among their comments were:

- “Showing this letter to my staff allowed me to encourage and motivate them to continue the work on The Productive Ward; we could see real improvement, and so could our patients.” Ward Manager
- “The letter from this patient showed how much our patients notice and care about how a ward works. It has made me more aware of how a patient might perceive my actions.” Staff Nurse

Both Beccy Maslin and Rob Marchment gave a workshop at the Healthcare Innovation EXPO in March 2011, which brings together the best in innovation from the private, public, voluntary, scientific and academic communities. They talked about the difference The Productive Ward made to the hospital environment in Papworth.
Food, glorious food.....

Apple Tree ward is a stroke recovery ward at Hinchingbrooke Healthcare NHS Trust. Patients can spend up to six weeks as part of their rehabilitation after a stroke. Part of this rehabilitation process is finding ways to cope with life after a debilitating stroke and helping patients learning to live life in new ways. One of the important first steps can be learning to eat again.

On Apple Tree ward the staff team have used The Productive Ward Meals module to increase their focus on simple solutions that the staff team can put in place, and to think through how they can work more closely with patients and their families to achieve this goal.

Introducing the “red tray and jug scheme” has helped to instantly identify patients at a glance who need support with eating and drinking. It means that even during busy periods, staff can easily spot patients who are given food on red trays and red water jugs, and are then able to offer extra support with eating and drinking.

Lisa Shacklock, Productive Ward: Releasing time to care™ and Patient experience lead, explains that patients often did not like eating in front of people, or were uncomfortable in taking a long time to eat while re-learning eating skills. “We have introduced protected mealtimes, so that patients are not disturbed while they eat, and every day we have named staff who are on hand as designated Meal Buddies. Their job is to make sure each patient gets the nutrition they need, and has time to support patients to practice new skills.”

The Meal Buddies do not just help out with meal times, they sit down with patients and their families to identify what types of food the patient likes, what textures and flavours they used to like before the stroke and experiment with new food going forward. Through discussion with the patients on the unit, the ward now provides a wider variety of food, and rather than big meals, they provide smaller portions, but little and often. Finger food is on hand to snack on or practice with.

Lisa explains “this has made a real difference to the ward. There has been a reduction in percutaneous endoscopic gastrostomy (PEG) feeding on the unit. Patients are getting to grips with these essential skills, it helps to get people back to their own homes early, which is where they want to be.”

It’s not just Apple Tree ward that has benefited from the programme. Lisa reflects that the Trust feels like a different place than it did four years ago. “We have introduced the Releasing time to care™ programme, single sex accommodation, applied the Well Organised Ward module to all wards and had some refurbishment. All of these processes have come together to create a much better, calmer, and welcoming environment. In the 2010/11 winter, the figures tell us that we had the same high numbers of patients using the service as the year before, but you wouldn’t have believed it. The wards felt calmer, not the chaotic pressure that often comes with the winter period.”
The Trust are rolling out the *Releasing time to care™* programme across the whole hospital. It has already created a stronger culture of patient engagement. Every new module gets input from patients. Staff have really noticed the increased time to spend directly with their patients. Positive patient experience rose from around 86% to nearly 96% in six months.

The Trust Board are very focused on patient issues. Every month the Board meeting starts with a patient story. Nurses bring a story to the Board meeting, sometimes the story comes from nursing experience on the ward, and sometimes patients attend the meeting to talk about their own experiences or communicate through audio recordings or videos. The Board is serious about listening to patients and acting on their input.

Following a recent story, the Board heard from a patient that the information that she had received prior to her treatment was confusing and hard to understand. As a result the Trust is reviewing all of its information to patients and is consulting widely to ensure the information is straight-forward, reader friendly and accessible to diverse community groups. Lisa and the Chair of the Board updated the patient on the Trust’s action plan and progress.

The patient wrote back to the Trust, thanking them for taking the trouble to let her know the outcome, she stated *‘It is gratifying that the work that you have done is producing good results. It is interesting that my small contribution as a patient can produce worthwhile results’.*
The Productive Mental Health Ward case studies

Leicestershire Partnership NHS Trust

A better environment for dementia patients

Leicestershire Partnership NHS Trust has always had a really strong ethos of engaging patients and carers in improving the quality of care. The service improvement team started rolling out The Productive Mental Health Ward programme in May 2009. All of the wards are now delivering the programme and 16 community teams have taken up the programme and are starting to see some real benefits for patients and staff. There are plans to roll the programme out to further teams.

The Trust realised early on in the process that the success of The Productive Mental Health Ward depends on encouraging the involvement of the whole team. They made it a core principle of their work that the carer and patient were essential partners in this team. The Trust has delivered the programme in a creative way, supporting innovative ideas from staff and service users to drive real improvements in quality and care.

Clarendon Ward, a 20 bed dementia care ward, looked at improving communication between carers, patients and staff. After gathering ideas using the NHS Institute’s “Experience Based Design” approach they set up a prominent notice board on the main corridor of the ward. This is their “You said... so we did” board. It lets staff and patients have conversations, suggesting and progressing ideas for improvements. It also outlines longer term projects in development and seeks comments and input.

Staff comment on The Productive Mental Health Ward Programme;

“\textit{I feel empowered. I always knew I could do better and now I am very eager. I am now able to manage my time better.}”

Healthcare assistant

“\textit{It’s opened my mind into creative thinking, thinking differently and opened doors to a range of leadership skills.}”

Staff nurse
In 2010 the Trust employed two ex-service users as improvement project assistants in the Trust’s wider service improvement team. These two posts brought unique perspectives and skills to the team. In addition to their “Expert by Experience” vantage point, both post holders had creative and listening skills that brought new dimensions to the work of the team.

A key achievement that was led by one of the project assistants was to work with patients and staff to create nicer environments using murals and colour. This is known to be helpful for patients with dementia.

Both project assistants are enjoying being part of the improvement team;

“I have had excellent service from the Trust in the form of good hospital care. Now, as my employer, they offer me the right support in terms of pressure and balance at work which I require. I’m back at work and it feels great!”

“My experience of being a user of the service and also a carer adds a new dimension to an improvement role. It’s refreshing to be able to make an employer aware of a mental health condition and it not be a barrier to employment.”
Ward entrance:

Before

After

Ward quiet lounge:

Before

After

Ward entrance: Information tree
Person centred wheels

The Trust has started using person centred wheels with their service users and carers (see the anonymised example pictured). ‘The person centred wheels work really well for service users who have communication difficulties’ they said, ‘The wheel outlines important information about the services user, for example, what they like to be called, their hobbies and relatives. They’re displayed in their bedrooms, and staff find them useful as they enable them to talk to the service user about their life experiences and interests.’ They go on to explain, ‘Each person centred wheel looks different, and we use either words or pictures depending on the needs of the service user – the only consistent thing is that the service user is always at the centre.’

Mindful of needs of their service users, the ward team developed a stimulating way of displaying information about the care team. Using the images of peaceful trees and natural environments, the staff team describe themselves on the leaves of the trees, with new information being added as the care team changes. In keeping with the person centred approach of the ward, staff are asked to share their hobbies and interests so that they can engage with service users in a more individual way. Comments, cards and other thoughts from patients are also displayed. “The ward feels like a much nicer place to be, it’s calmer, brighter and better to be.” Within the first few months of the project, the measures began to show a reduction in staff stress and short-term sickness, and improved morale.

Elsewhere in the Trust the ethos of service improvement and involvement is continued. Following a review of handover experiences, Beaumanor Ward is now trialling a new way of working where services users can lead the handover themselves. This embodies the “no decision about me without me” principle, allowing service users to present their own issues in their own words. To ensure that nothing is omitted, everyone follows a standard handover format using the Patient Status at a Glance board from The Productive Mental Health Ward modules. The benefit of this approach is that everyone uses the patient status information board, all key care issues are discussed and service users get to prioritise their own issues.
A new vision

Firs Villa, is a long-stay, high-dependency ward for up to 19 men. It treats people with medication-resistant disorders, including schizophrenia; length of stay on the ward can be up to 10 or 15 years. Consequently, it is vital that any changes on the ward, including creating a ward vision, involve patients.

“Patients see the villa as their home and we have to be mindful of that in everything we do,” said Acting Ward Manager Martina Griffiths. “We have a therapeutic community approach; we have a lot of community meetings and a flat hierarchy.”

Patients on the long-term Firs Villa worked with staff to develop their vision for the unit as part of The Productive Mental Health Ward programme.
Martina comments: “Everybody feels they own the programme. We let patients know what was happening and get their advice and opinions on how we could improve. The vision – that of a homely environment that is safe, sharing and embraces choice - is written up on the board, and patients can take credit for it, to say ‘I said that!’”

The team has worked through The Productive Mental Health Ward programme’s modules, keeping patients involved in the changes, and encouraged their ideas for improvements.

“We have problems with patients’ Body Mass Index, and one of the measures we created in the Knowing How We are Doing module is participation in ward-based activities,” added Martina. The activities have increased recently to include gym visits, swimming sessions, gardening clubs and ward walks.

Using the Meals Module of The Productive Mental Health Ward programme, patients and staff identified that creating a shared mealtime would be a way of increasing care time and patient/staff engagement on the unit. The team found that meal times took an average of 55 minutes. They now allot 25 minutes of that time to prepare and clear away the meals and 30 minutes for staff and patients to sit down and eat together, which is something that did not happen before.

Healthy eating was also identified as a priority on the ward. The team is looking at ways to develop nutritional management of meals, including the introduction of a deli bar for patients and staff. Martina said: “The patients order two days in advance at the moment, and they have said they want to choose the food on the day. A deli bar is one way we could do this.”

The team is now working with the facilities department to look at creating the deli bar. The facilities department has been involved throughout The Productive Mental Health Ward programme as a member of the Steering Group.
The Productive Operating Theatre

Reducing waiting times

A patient satisfaction survey carried out by the Sunderland day case centre at the Medway NHS Foundation Trust in 2008 found that over half (58%) of patients attending the pain session had waited over two hours for their treatment. When the Trust repeated the survey a year later, it found that the situation had worsened, with 80% of patients waiting over two hours for their treatment. The Trust knew it needed to act and staff at the day case centre began implementing The Productive Operating Theatre.

The Trust wanted to ensure patients had a good experience of care and tackling waiting times was a priority.

Patients were asked how the situation could be improved. Among the suggestions were:

- “The waiting times should be reduced by staggering the times the patients come in. You know what order they are on the theatre list so they should be asked to come in just before they are due to go to theatre.”
- “Coming in at 7.30am for a procedure at 12 is unacceptable, I could have come in later.”
- “Maybe a timed appointment would be a good idea?”

Using tools from The Productive Operating Theatre programme, the team decided to trial staggered admission times in the afternoon. Lots of small but important changes were made to theatre scheduling, surgery start times, interaction with other teams like X-ray, and communication with patients.

Since implementing the programme the Trust has experienced:

- increased patient satisfaction with their admission process and a reduction in complaints due to waiting
- an improvement in bed flow and fewer bottlenecks at the start of the sessions
- the safe and efficient transfer of patients from admission to procedure
- a more patient-focused approach
- a calmer atmosphere, with improved facilities to ensure dignity and privacy when checking-in patients.
Delays have reduced during the lists and nurses have reported that there is less pressure on them and more time to spend with their patients. Receptionists on the unit are supportive of the staggered admissions, as it causes less queuing when patients book in and means that the reception area is less congested.

Following a questionnaire carried out three months into the trial, it was evident that the patients preferred the staggered admission arrangements too.

After the successful pilot, there are now plans to explore the idea of introducing this approach with other specialties.

Sharon Austen, former Service Development Manager, sums up the Trust’s commitment to the programme:

“The Productive Operating Theatre gave us an opportunity to trial improvements in our day surgery unit. While there may have been reluctance to change at first, we have stressed that our focus is on improving the patients care and experience from the patients’ perspective. This gave us the support we needed to persuade staff to try these changes.”
Productive Community Services

Productive Community Services modules are uniquely developed to include partnership working and working across a community in patients’ homes.

Coventry and Warwickshire Partnership NHS Trust

Supporting patients to manage their own conditions

Coventry and Warwickshire Partnership NHS Trust (formerly known as Coventry Community Health Services) was a test site for Productive Community Services prior to the programme’s national launch and the Trust has been implementing the programme since April 2009. The programme is benefiting both patients and staff, at the same time as increasing efficiency and productivity.

One of the programme’s modules, Agreeing the Care Plan with the Patient, focuses on developing care plans for patients, with personalised goals and actions. The idea is to empower patients to take responsibility for their own conditions and it has proved highly successful in Coventry, according to district nurses. A patient in his 80s suffered repeated problems with his catheter blocking before being given a personalised plan which included advice and goals around drinking fluids, exercising and hygiene. After receiving the plan, he went the full 12-weeks without experiencing catheter problems.

Another elderly patient was housebound and wanted to be able to take his wife out for dinner. The district nursing team worked with him to improve his exercise and nutrition and to heal the leg problems that restricted his movements. After a few weeks, he was able to achieve his wish.

“This is about treating the person holistically and empowering them to take control of their conditions” says Teresa Billing, community sister for the Wood End team. “We jointly agree goals with the patient and work towards them. The results have been really encouraging.”
Conclusions

The Productive Series helps staff to deliver better care. The programmes help to identify how to eliminate time wasting activities so that this precious time can be spent where patients most need it. The Productive Series releases time to spend on improving the quality of care. This means improvements in key areas that matter to both patients and staff:

- more time with the patient and their families,
- time to focus on improving safety such as preventing infections, falls, pressure ulcers and avoid other harm events
- time to change processes to make them safer and more focused on patients needs; such as addressing meals and hydration, improving medicines rounds
- time to better co-ordinate care so that patients can go home quickly, with the right care package in place.

The Productive Series help staff to deliver high quality care, with patients being at the centre of these benefits.

“The mutual respect was evident even before I saw the “Ward Vision.” They [staff] are more special than they realise.”

Rob Marchment, patient on a Productive Ward

What can you do now?

PATIENTS AND RELATIVES/CARERS - Find out more about where you are being cared for - are you being cared for in a Productive environment? If not, tell your care team about these programmes, they are free for NHS trusts.

NHS STAFF - Tell your care teams about the examples you have seen in this pack. Are you delivering the programmes in your trust?

FIND OUT MORE!
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