



**P4P<sup>2</sup> Newsletter**  
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# The Partnership for Patient Protection (P4P<sup>2</sup>) Self-Harm Project

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***Striving for  
Perfect Care***

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It's been several months since our last newsletter, in which we described how the four project wards were trying to reduce incidents of self-harm. Issue three here provides you with an update on the progress of each and highlights some of the fantastic results so far achieved.

## **How might we...?**

Having prioritised the interventions (or "how might we?" statements) they wanted to take forward, each of the wards has been working hard over recent months to deliver their respective project plans.

**Arnold ward** has tried to maintain three stable and consistent staff teams, although this has proved to be something of a challenge. Their associate specialist psychiatrist has delivered a number of educational sessions in self-harm and personality disorder, and the team are also using reflective practice to explore responses to patients who self-harm.

**Poplar ward** has been sharing service user information more routinely through daily Safety Huddles so as to identify and manage heightened risk at a much earlier stage. They are planning a number of self-harm training sessions to be delivered during August, and the range of social and recreational activities has also been increased.

**Dee ward** has established a daily community meeting so as to engage patients in more structured and meaningful activities. The ward psychologist facilitates an Emotional Coping Skills group and has trained a number of nurses as DBT coaches.

**Harrington ward** has been exploring a range of alternatives to self-harm. They have established a set of Clear Mutual Expectations, in conjunction with patients, and their psychologist also facilitates an Emotional Coping Skills Group with the support of nurse DBT coaches.

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***Combining  
several 'How  
Might We'  
interventions  
simultaneously  
can be viewed as  
"the aggregation  
of marginal  
gains"***

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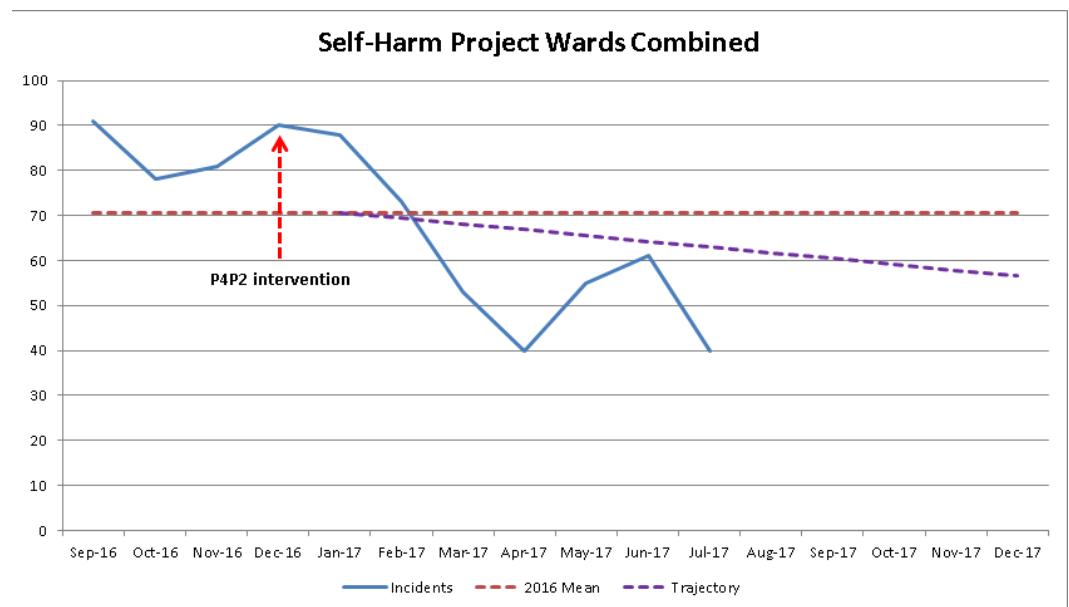


## Impact

In figure 1 below you can see that when combined, there has so far been a 43% reduction in the frequency of self-harm incidents across the four wards since the first of the interventions was implemented. Wards have also reported other positive benefits such as a calmer ward atmosphere, improved morale and job satisfaction, lower levels of sickness absence and enhanced observation, and less dependency on bank and agency staffing.

It's important to acknowledge the influence of other factors as well – such as No Force First and local quality improvement initiatives – but I'm sure you'll agree these are really encouraging results as such an early stage in the project.

**Figure 1 – Frequency of Self-Harm Incidents**




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*“If I have a thousand ideas and only one turns out to be good, I am satisfied.”*  
**Alfred Noble**

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## Next Steps

Members of the project team will be attending the Trust's Operational Management Board in September to discuss with Divisional leadership teams how these changes can be embedded in everyday practice, so we can start to engage the next phase of wards in the project.

For further information, or to get involved in the project, please contact Tim Riding, Associate Director in the Centre for Perfect Care, at [Tim.Riding@merseycare.nhs.uk](mailto:Tim.Riding@merseycare.nhs.uk).