

Culture of Care: Staff Care & Development Programme

Community of Practice summary

Shared learning from the Programme:

<p>The connection to management/senior leadership is important for how much teams feel able to act on their own initiative.</p>	<ul style="list-style-type: none"> • <i>As a ward team, looking for advocates/ supporters can unlock motivation.</i> • <i>Open door policies, frequent visits, and personal relationships with leaders can help wards feel more connected.</i>
<p>Staffing issues are frequently mentioned as both the source of challenges, and a barrier to making changes.</p>	<ul style="list-style-type: none"> • <i>A narrow focus on one small project can enable big impacts while staying doable.</i> • <i>Spreading actions between people can build buy-in as well as keep things moving.</i>
<p>Steep power dynamics often meant divisions between staff grades, disempowered junior staff, and staff feeling unsafe/worried about blame.</p>	<ul style="list-style-type: none"> • <i>More equal dynamics can mean junior staff being involved in e.g. ward round meetings, or MDT members being on the ward more.</i> • <i>Support after incidents (e.g. debriefs, checking in) can help staff feel valued, especially if support is the same for all.</i> • <i>Supervisions with trusting relationships and confidentiality were felt to be important for feeling supported.</i>
<p>Some wards experience consistent racial abuse from service users, often with low rates of reporting.</p>	<ul style="list-style-type: none"> • <i>Showing issues raised will be acted on, and de-normalising incidents, were mentioned as ways to encourage reporting.</i>
<p>Internationally educated nurses were highlighted as an overrepresented group among</p>	<ul style="list-style-type: none"> • <i>Understanding different expectations of respect and deference within other cultures is helpful for teams to support these staff.</i>

<p>staff feeling discriminated against or excluded.</p>	<p>Greenfields Ward shared their project focusing on improving staff understanding of cultural diversity. Each month, allocated staff members research and lead therapeutic groups on two cultural celebrations (e.g. Diwali).</p>
<p>Many teams are trying hard to work 'for' service users (e.g. activities on the ward, reduction in restrictive practice) but very few teams were confident in their co-production capabilities, beyond choices about their own care.</p>	<ul style="list-style-type: none"> ● <i>Creative approaches e.g. holding teas, can help engage service users, even where there is perceived lack of capacity (especially common on learning disability and children's wards).</i> ● <i>Support from leadership or other organisations can help engage lived experience other than current service users, e.g. former service users (from this or other ward) or peer support workers.</i> <p>Rosemary Ward shared their project centred on improving relationships and communication with carers, with input from current patients. This includes improving the visit room, the ways staff involve carers on the ward, training staff to build confidence speaking to carers, and creating "This is Me" posters.</p>

Discussions during the Community of Practice:

Theme 1: Safety on Ward

- Safety is **physical, psychological, and relational**.
- Creating environments where staff feel comfortable raising concerns and sharing experiences is particularly important in **supervisions and reflective practice**.
- We need clear and open communication between staff, patients, and management. **Consistent protected time** between staff and patients can be a powerful way to do this.

Theme 2: Lived Experience

Lived experience involvement means:

- Involving service users and carers as equal partners alongside staff as part of the **Triangle of Care**.
- **Everyday informal conversations** to help staff get to know service users, shape individualised care, and build service users' trust.
- **Formal lived experience roles**, in both direct care and strategic roles, with structured career pathways available.
- **Collecting feedback** from current and past service users, through:
 - Creating trauma-informed environments where service users feel safe to voice concerns
 - Using clear and accessible language, and digital tools e.g. apps to help for non-verbal or younger service users
 - Reaching out to past service users who have positive experiences to provide feedback without retraumatising

Theme 3: Addressing Racialised Dynamics

Racial abuse from service users has an exhausting and retraumatising impact on staff experiencing it, particularly given under-reporting. This can be addressed through:

- **Clear policies and procedures**, communicated to staff and service users, e.g. through an anti-racism statement or flow chart for responding to an incident.
- **Ongoing training** for staff to spot and respond to incidents, raise awareness, and set zero tolerance expectations - partnering with anti-racism organisations can help here.
- Establishing **clear consequences** for service users exhibiting racist behaviour, up to transferring to a different ward in severe cases. Having police coming in to give an informal verbal warning can make a difference with repeat offenders.
- Working with local police to ensure effective action from incidents, set consequences, and potentially supporting **third-party reporting** to avoid retraumatising the recipient of racial abuse.

It needs **action from everyone**, as inaction in the face of need means supporting the status quo and allowing racism to persist.

Theme 4: Addressing Power Dynamics

Creating equitable and effective team environments means:

- Seeing **mistakes as learning opportunities**, not failures.
- **Distributing information** proactively, asking clarifying questions, and not assuming knowledge.
- Creating **psychologically safe** environments where everyone feels comfortable sharing ideas and taking managed risks.
- **Present and accessible leaders** demonstrating genuine interest and support, who **empower their teams** by encouraging participation, valuing input, and delegating decision-making.
- **Open and honest dialogue**, with everyone actively listening to others' concerns and ideas.
- Balancing **asking questions** to get input, and **advocating** for those who might be less assertive in responding to questions.

Theme 5: Bringing our Full Selves

- **Sharing personal experiences** is valuable to build stronger relationships, but should be done carefully and only when beneficial to the therapeutic relationship, to **maintain boundaries** and strike a balance between personal authenticity and professional responsibility.
 - It's also important to create a **safe and supportive** environment where individuals feel comfortable sharing their vulnerabilities.
- **People in authority** in particular face challenges in adjusting their communication styles to have effective relationships with subordinates and superiors.