



An Stiúirthóireacht um Ardchaighdeán
agus Sábháilteacht Othar
Oifig an Phríomhoifigigh Clínicíúil

National Quality and
Patient Safety Directorate
Office of the Chief Clinical Officer



Centre for Innovative Human Systems

PEOPLE
PROCESS
PERFORMANCE



Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

Building a Just Culture in Healthcare:

a HSE Dialogue

Croke Park Conference Centre, Dublin
23rd May 2023



Building a Just Culture in Healthcare: *a HSE Dialogue*

Session 2

Keynote presentation

Chair: Ms Lorraine
Schwanberg, Assistant National
Director, QPS Incident
Management, NQPSD, HSE



Building a Just Culture in Healthcare: *a HSE Dialogue*

Restorative Just Culture in Practice: The Challenges, The Learning and the Impact

Joe Rafferty CBE, Chief Executive

Amanda Oates, Executive Director of Workforce



Mersey Care NHS
Foundation Trust





Mersey Care
NHS Foundation Trust

Community and Mental Health Services

Restorative Just Culture in Practice:

The Challenges, The Learning and the Impact

Joe Rafferty | Chief Executive at Mersey Care

Amanda Oates | Executive Director of Workforce at Mersey Care

Purpose of the session

1. Introduce you to Mersey Care NHS, FT
2. To understand what is Just Culture, Why a Just Culture, and your culture prompts ?
3. To understand Mersey Care's journey
4. To explore the benefits of implementation
5. To share how Mersey Care's learning and practices can help address the challenges you will face
6. To consider the impact and benefits of RJC practices
7. To highlight what RJC implementation might look like and include.

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**Mersey Care
2021**



- Provider of **specialist inpatient and community services** that support **physical and mental health and specialist inpatient mental health, learning disability, addiction and brain injury services.**



171 sites
(owned and leased)

Income budget
£600m

11,340 Staff
(June 1 2021)



36,856
Local, secure and specialist
LD service users

1,805,976
outpatient attendances



997
inpatient beds

Quality Review
Visits for
309 teams

53,866
Life Room visits
(pre Pandemic activities)

Mersey Care is one of the largest healthcare employers in the north west

What is Mersey Care?



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11,340
STAFF

One of the **LARGEST** healthcare employers in the North West



997
BEDS

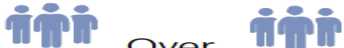
1 OF 3 providers of high secure services



OVER £573M TURNOVER

The biggest **IAPT SERVICE** in the NHS

Over **100,000** LIFE ROOMS VISITORS



Serve a population of **MORE THAN 11 MILLION** in North West England and beyond

ONE of only FIVE NHS inpatient addictions services in the country



6 FOR OUR LOCAL SERVICES **LOCAL AUTHORITIES**

- LIVERPOOL
- SEFTON
- KNOWSLEY
- ST HELENS
- HALTON
- WARRINGTON

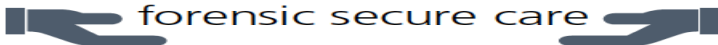
New provider of community services across Sefton



5,000+ social prescriptions since January 2012



Largest provider of **learning disability** forensic secure care



Mersey Care's Culture



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OUR VISION



Our vision is to strive for perfect, whole person care that helps people live happier, healthier lives.

OUR GOALS

- OUR SERVICES** - Combine clinical excellence with prevention and care coordination in our services
- OUR PEOPLE** - More people choose to work at Mersey Care and service users feel they have more control over their health
- OUR RESOURCES** - Use our buildings, IT and money to enable clinical excellence with prevention and care coordination in our services
- OUR FUTURE** - Be a good partner organisation and strive for new advances in care and treatment



STRIVING FOR PERFECT CARE

Stretching goals to keep us at the forefront of challenges and maintain our leading safety status.

- ZERO** acceptance of racism, discrimination and unacceptable behaviours
- ZERO** restrictive practice
- ZERO** suicide
- ZERO** harm from medication
- ZERO** falls in our care



OUR VALUES

The way we will achieve our vision, mission and goals - built on a solid foundation of restorative just and learning culture.

- C** **Continuous improvement** – committed to making improvements to our services for the benefit of all
- A** **Accountability** – taking ownership to anticipate, develop and deliver high quality care
- R** **Respect** – how we treat others in an inclusive and supportive way
- E** **Enthusiasm** – demonstrate our passion and pride for what we do and how we do it
- S** **Support** – actively supporting others with compassion and courage



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What is Just Culture, Why a Just Culture & your culture prompts?

Reflect – Have you ever made a mistake?



Mistake

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Have you ever made a mistake?

ⓘ Start presenting to display the poll results on this slide.



How did it make you feel?

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How did it make you feel?

ⓘ Start presenting to display the poll results on this slide.

What is a Restorative Just Culture

“Restorative Just Culture aims to repair trust and relationships damaged after an incident...”

Sidney Dekker



Restorative

- *the ability to restore health, strength, or well-being*

Just

- *behaving according to what is morally right and fair*

Learning

- *acquiring new understanding, knowledge, behaviours, skills, values, attitudes, and preferences through study, experience or being taught*

Accountability

- *forward looking accountability. What is needed in the future to prevent reoccurrence (putting it right) – rather than backward looking accountability*

From Retribution to Restoration

Retribution

- Which rule is broken?
- Who did it?
- How bad is the breach?
- What should the consequences be?

But its counterproductive...

Learning, Team
Review , Humanity
Compassion, Forgiveness
Understanding, Restoration
Healing , Trust

Restoration

- Who is hurt?
- What are their needs?
- Whose obligation is it to meet those?
- How do we involve the community?

Goals of restoration

- Moral engagement
- Emotional healing
- Reintegration of practitioner
- Organisational learning
- Prevention

Goals of RJLC



Moral engagement — engaged parties in considering the right thing to do now



Emotional healing — helped cope with guilt, humiliation; offered empathy



Reintegration — done what is needed to get person back into their role, at their full potential



Organizational learning — explored and addressed systemic causes of harm



Creating Psychological Safety - Making the conditions for colleagues to feel safe to speak up without fear of consequence

How do you know what culture you have?

Hard

- Patient outcomes/ complaints and experience survey
- Staff Survey Results
- No. Employee Relations/Grievance Cases
- No. Suspensions
- Staff Turnover
- Sickness Data
- Exit interviews
- Regulatory feedback
- Court case outcomes
- Employment Tribunals

Soft

- Team Dynamics
- Inter departments transfers
- Freedom to speak up function/ cases (Protected disclose)
- Stories – staff/ customers
- What do people say about the organisation?
- Closed cultures
- How we say sorry
- Story of Denise

Your experiences of culture - Slido



- Q1 – Is culture important and why?
- Q2 – Does culture impacts team/organisation safety, wellbeing, performance/experience etc and why?
- Q3 - Do you live by your organisations values and how are they operationalised, embedded in your role modelled

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Is Culture Important and why?

ⓘ Start presenting to display the poll results on this slide.

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**Does Culture impact
team/organisation safety,
wellbeing, performance,
experience etc. and why?**

① Start presenting to display the poll results on this slide.

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Do you live by your organisation's values and how are they operationalised, embedded and role modelled?

① Start presenting to display the poll results on this slide.

Why is a having a good Culture important?

- It offers a way for employees to understand their organisation, to voice their views, and to develop connections and common purpose.
- The organisational purpose and values will affect the standard of care and staff morale
- It effects psychological safety and trust



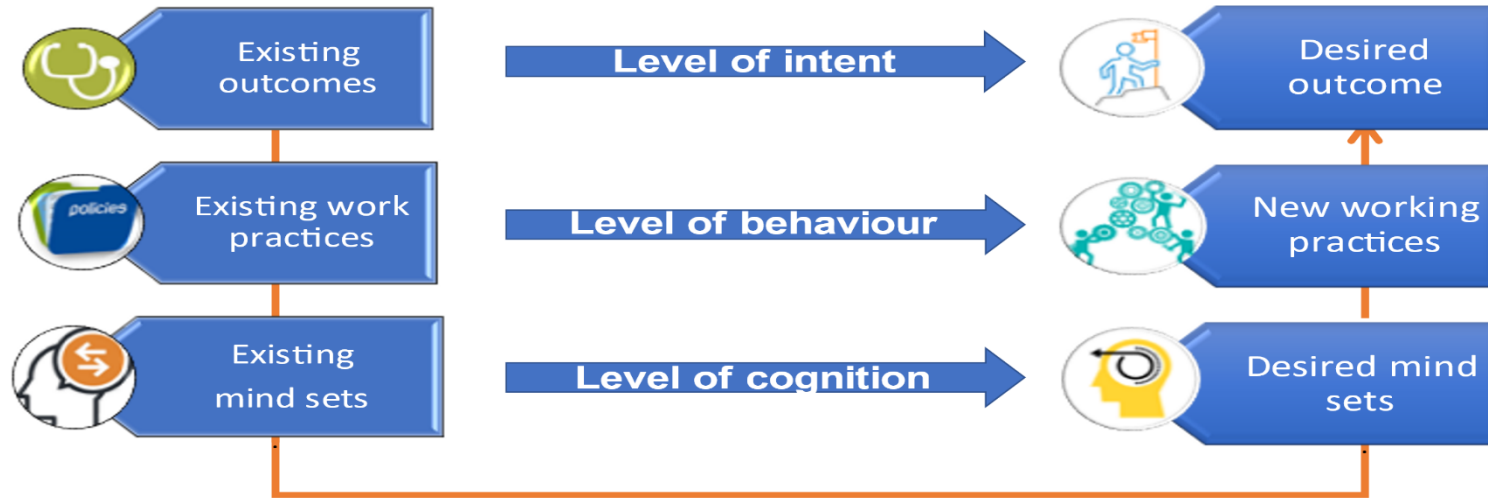
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Improvement is all about culture, supported by great process

Why mind sets matter



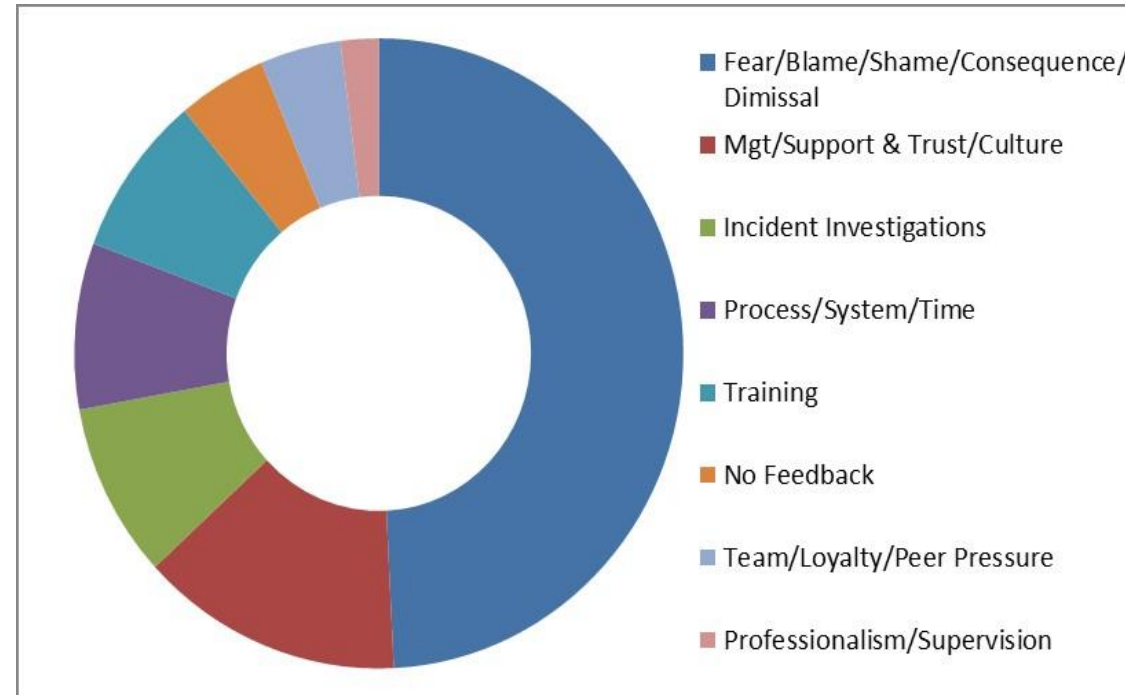
					
Compliance	Instruction	Prescription	Deference	Retribution	Individual genius
Curiosity	Involvement	Participation	Diversity	Restoration	Collective wisdom
					

To understand Mersey Care's journey



Retributive the impact on staff

- Fear of consequences, blame, shame and being dismissed
- Lack of support or trust, 'adversarial'
- Incident investigations
- Lack of feedback / learning
- Improvements not maintained or sustained



A large iceberg floating in the ocean. The tip of the iceberg is visible above the water line, while the vast majority of the iceberg is submerged below the surface. The sky is blue with light clouds, and the water is a deep blue. The text is overlaid on the submerged portion of the iceberg.

Staff wanted a staff perfect care goal

...they wanted to work in a safe place, be treated fairly and compassionately, and so our Just & Learning Culture was born....

Our Restorative Just and Learning Culture



“A just culture accepts nobody's account as “true” or “right” and others wrong... “

...Sidney Dekker

Developing a non punitive culture

- Learning can only flourish when responses to mistakes are **compassionate**
- Personal **responsibility** and **professional accountability** drives the organisational learning
- It's not about 'blame-free' or being tolerant of absolutely anything
- A **prospective** outlook rather than **retrospective** bias
- Ask **what** and **how**, not **who** because a bad system will always beat a good person.



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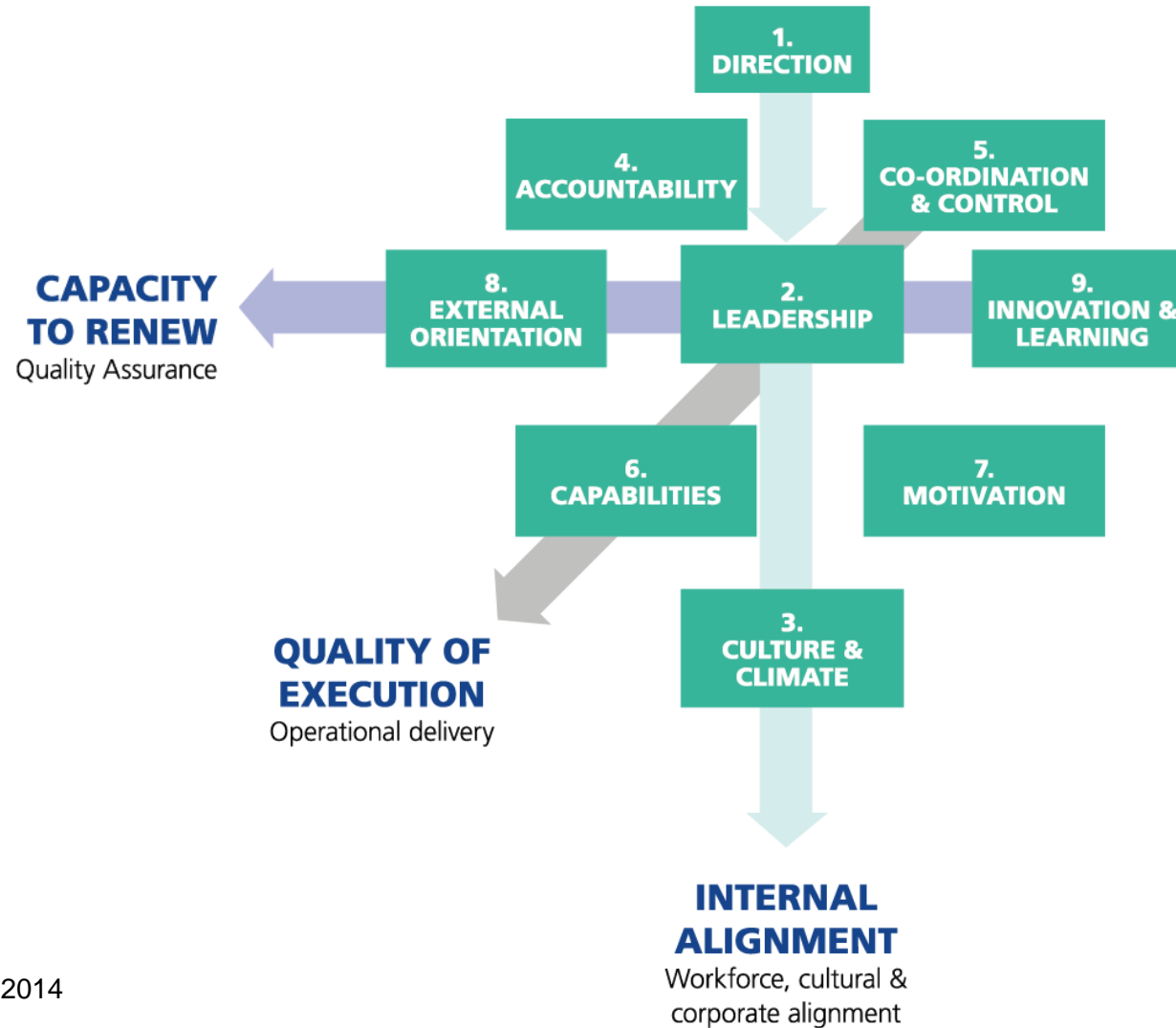
**To explore the benefits of
implementation**

Organisational Performance & Organisational Health



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Benefits & Challenges



For Senior Leaders

Consider their style & impact,

Asking them to move from an old way to a new way of leading

Credibility and humility

For the Workforce

Safe to raise a concern

Culture that allows the boss to hear bad news

Empowered to catch errors

Accountable not punished

Improve disproportional experience

For Patients

Accountable staff

Reduce risky behaviour

Reckless behaviour is not accepted by anyone

Staff morale is high as staff are empowered to do the best job they can do

Benefits & Challenges



For the Organisation

- See transparency and openness as allies not enemies;
- Sharing good practice stories
- Trickle down of restorative culture in everyday organisational life
- To create the best safety culture, staff have to feel safe themselves
- Learning to prevent
- Systemising change

For Policies & Procedures

- Co-produced approach with staff, unions, ambassadors and patients/users;
- Reduced in number
- We put people before process
- We have focused compassionate HR and patient safety systems and processes;
- Shift in judgemental language

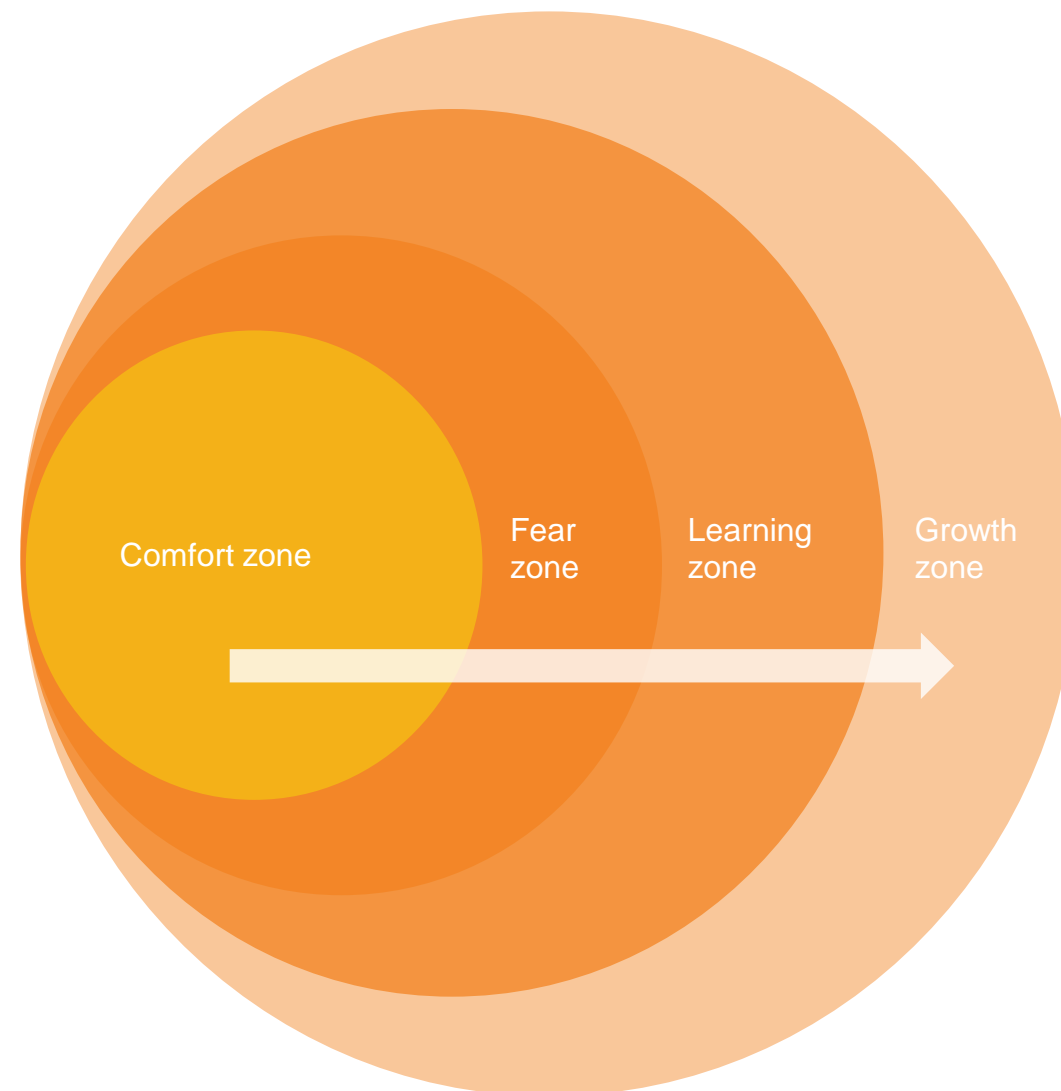
**Sharing Mersey Care's learnings
and practices to help you address
the challenges you will face?**

**What we wish we knew at the
start of our journey**

1. Leadership, accountability & discomfort

Why is it hard for leaders?

- If I say we need a new way, am I saying the old way I was harming people ?
- Accountability
- Question own values and beliefs
- Fallibility – causing harm
- Culpability
- Vulnerability i.e., back in the day



2. Building Psychological Safety was critical

Setting the Stage	Inviting Participation	Responding Productively
<p>Frame the Work</p> <ul style="list-style-type: none"> Set expectations about uncertainty, failure and interdependence to clarify the need for voice <p>Emphasise Purpose</p> <ul style="list-style-type: none"> Identify what's at stake, why it matters, and for whom it matters 	<p>Demonstrate Situational Humility</p> <ul style="list-style-type: none"> Acknowledge gaps <p>Practice Inquiry</p> <ul style="list-style-type: none"> Ask good questions Model intense listening <p>Set Up Structures and Processes</p> <ul style="list-style-type: none"> Create forums for input Provide guidelines for discussion 	<p>Express Appreciation</p> <ul style="list-style-type: none"> Listen Acknowledge and thank <p>Destigmatize Failure</p> <ul style="list-style-type: none"> Look forward Offer help Discuss, consider, and brainstorm next steps <p>Sanction Clear Violations</p>

Psychological safety is the belief that you won't be punished, humiliated rejected for speaking up with ideas, questions, concerns, or mistakes.

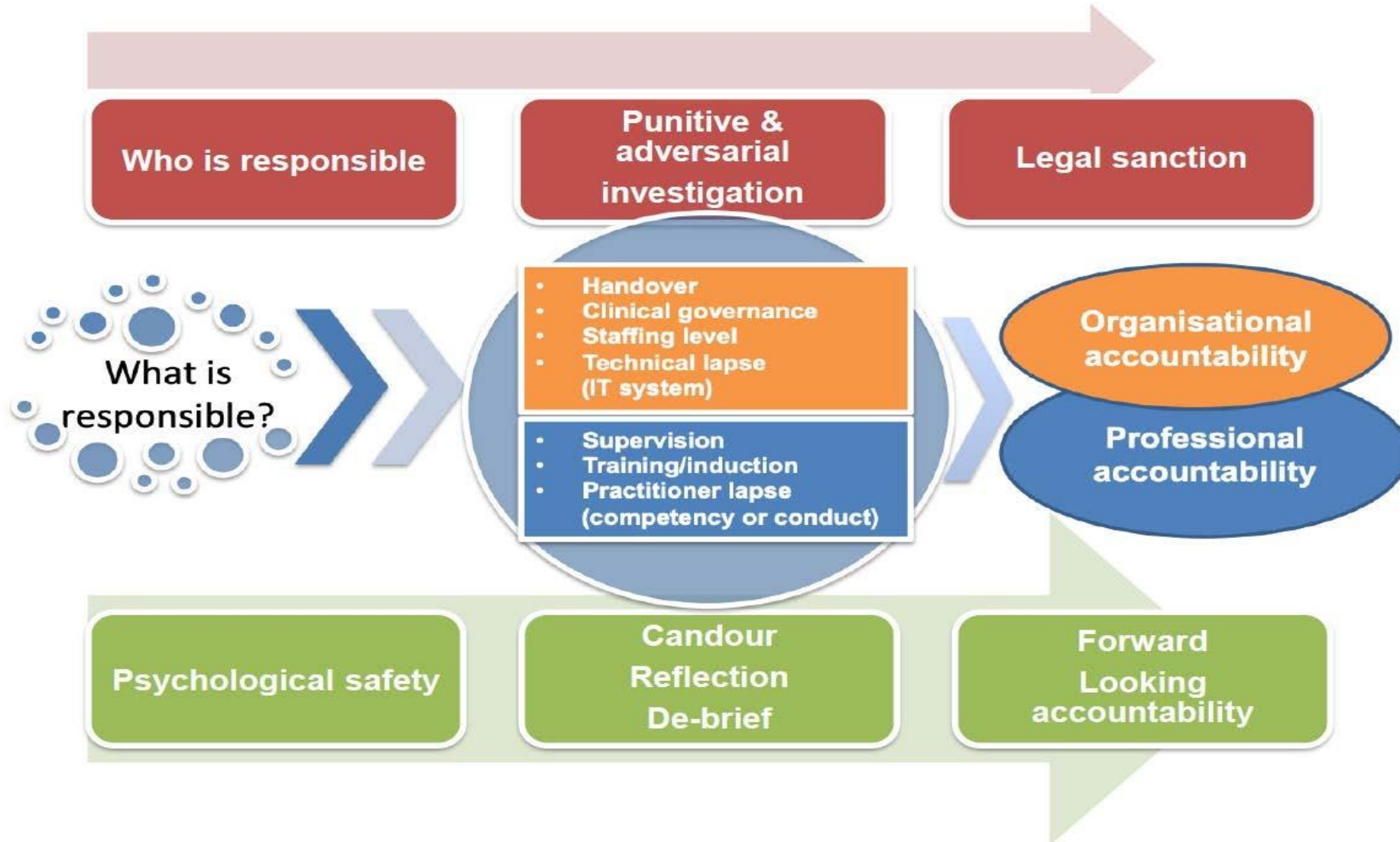
3. The Importance of Language

Semantics is critical
 Why did you make that mistake
 Why did you go wrong V
 Language in policies critical
 Language in dialogue critical – led from the top

4. Have a framework

Our Just and Learning Culture has shaped how we have approached improvements in our people processes.
 This supports the Trust aim for Perfect Care for all of our patients and service users.

5. Distinguish between Causality vs Contribution



6. Hindsight Bias

- Knowing the outcome of an event or incident increases people who are outside that incident to convince themselves they would have handled it differently, made different decision or some other variable that would have prevented the outcome.
- Retrospective bias
- Counterfactual bias
- Judgemental bias
- Proximal bias

7. Work as imagined & work as designed



User experience

Design

8. Respect & Civility

The #IWillSpeakUp campaign encouraged bystanders to feel supported to 'speak up' if they see poor behaviour. This campaign had a direct correlation on our staff survey results.



Respect		MCT 2022/23	MCT 2021/22	MCT National Rank*	All MH / LD/Comm Community Trusts	MCT North West Rank	Comparison with National Combined MH / LD and Community Trusts
14d	The last time you experienced harassment, bullying or abuse at work, did you or a colleague report it?	64.1%	64.7%	12th	11th	2nd	Consistent with national average

Out of 215 Trusts

Team Canvass



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Community and Mental Health Services

Our Team Canvas		NHS Mersey Care NHS Foundation Trust Community and Mental Health Services	
<Insert Team Name>			
WHAT	HOW		
<p>Our Purpose:</p> <p>We provide a safe environment where we deliver effective care instilling hope and promoting recovery and independence.</p>	<ul style="list-style-type: none">• Our leadership team will keep morale high and consistent and be approachable and understanding of staff and patients• We will support each other and recognise our teams strengths and weaknesses• We recognise the use of humour in building rapport and de-escalation• We will be enthusiastic in the delivery of care for our patients through shared goals• We will respect and value each other in order to work to the best of our abilities• We will have informative handovers and transparent running of the ward on a daily basis• We will work together to develop a trusting relationship by being respectful to each other, communicating openly, being transparent, valuing different views and opinions and getting to know and support our colleagues• We will have clear defined roles which will inform our systems and processes to help us maintain consistency across the ward• We will embed a Just and Learning culture to help staff reflect, learn and develop		
<p>Our Objectives:</p> <ul style="list-style-type: none">• To maintain consistent approaches across staff groups in how we respond to and care for all patients by October 2020 through Care Plans• To revise structure of handovers and meetings on the team by October 2020 with implementation from December 2020• To create a process for patients to attend Care Team meetings by November 2020• Ward staff to begin to attend Dr's clinics by December 2020• To commence training sessions on Personality Disorder awareness for all staff by November 2020 with all staff to complete by January 2021			
WHO	SO WHAT/REVIEW		
<p>Who's in our team:</p> <ul style="list-style-type: none">• Rachel: Ward manager. Dealing with conflict.• Joey: Charge Nurse. Resilience.• Chandler: Charge Nurse. IT skills• Phoebe: Charge Nurse. Coaching• Ross: Consultant. Problem solving.• Monica: Psychologist. Mediation.	<ul style="list-style-type: none">• Reflective practice will take place once every 2 weeks• We'll use a positive language approach in our daily handovers• We'll complete our re-validation in time with guidelines• We'll attend Safety Huddles as required reporting and actioning improvement plans• We'll have monthly leadership team meetings and a whole team away day once per year• Any incidents will be discussed with the whole team within 72 hours and we'll carry out trend analysis		
<p>Others we work with:</p> <ul style="list-style-type: none">• Our most productive relationships are with Occupational Therapy and Security services• We need to work on our relationships with staffing services and our peer networks			

10. Team Based Learning – the benefits



Team based learning has demonstrated assurance when used in conjunction with RCA methodology for serious incident learning reviews. Positive feedback has been received from our ICB on our approach to learning and engaging .



Team based learning has received positive feedback from those staff involved. Staff have reported they have found the sessions supportive and an opportunity to reflect on practices in psychologically safe place.



The PST have developed a team based learning toolkit which is available to support the facilitation of the learning events, this can be tailored to the team involved and includes specific terms of reference.



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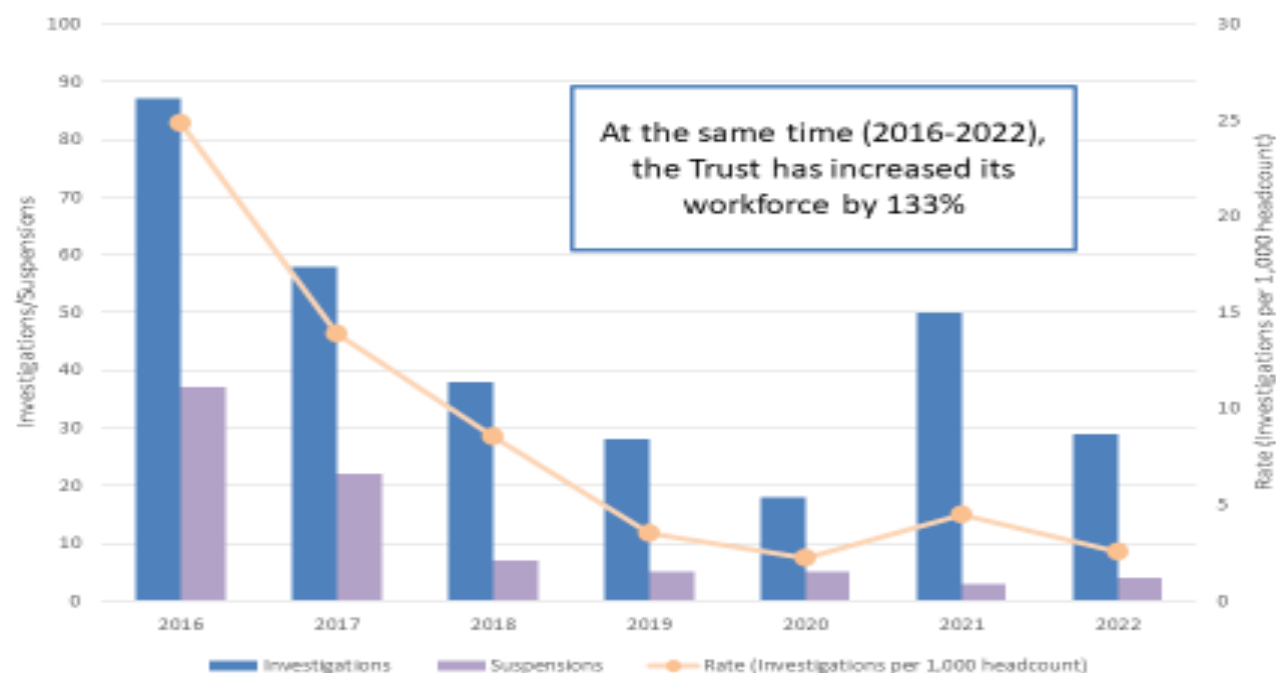
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The impact and benefits of RJC practices

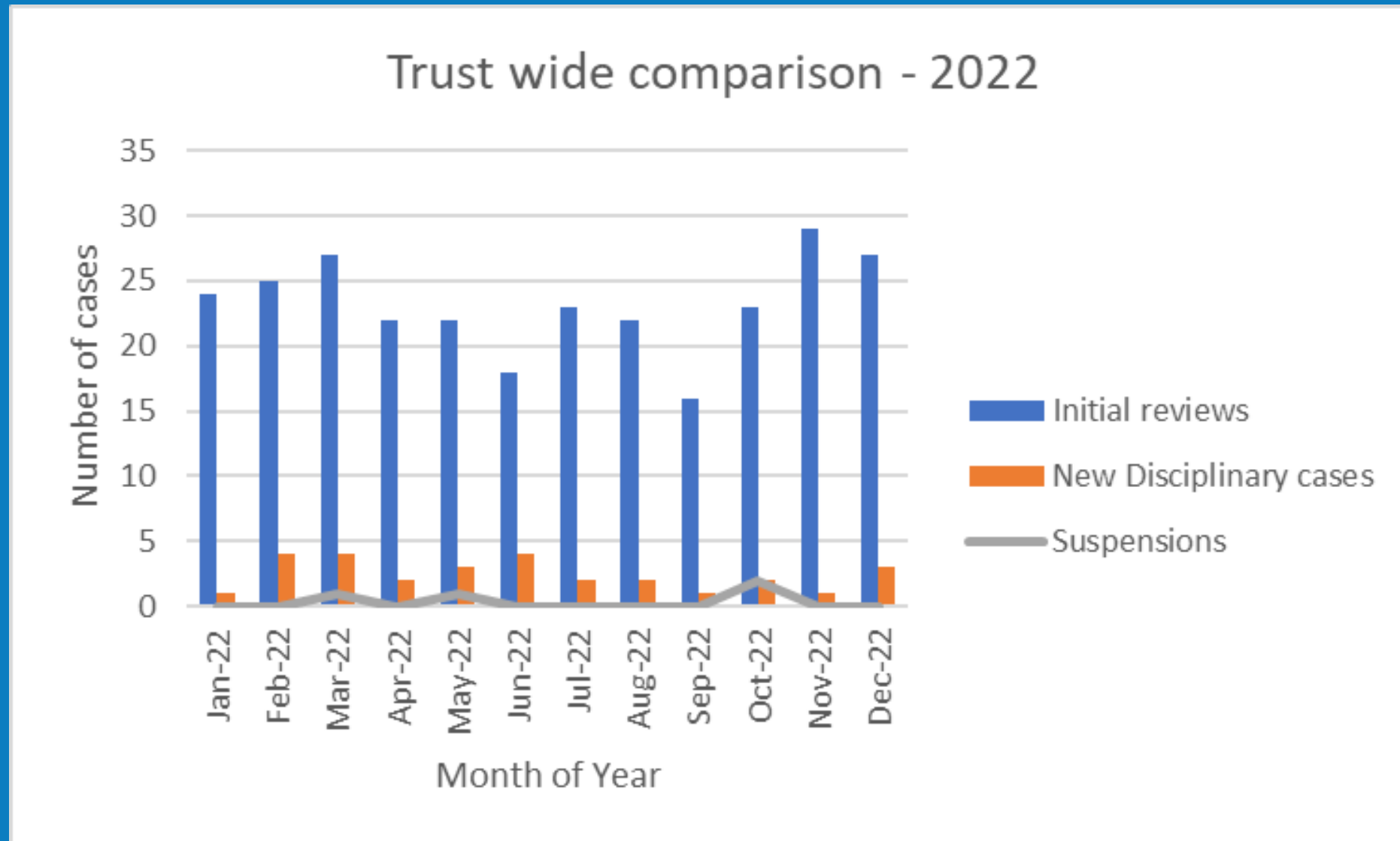
The Data Impact

Disciplinary Investigations and suspensions

- Investigations have decreased by 71% from 2016 to 2022
- Suspensions have decreased by 89% from 2016 to 2022
- 1570 investigations and 669 suspensions have been avoided through using our RJLC processes since 2016.



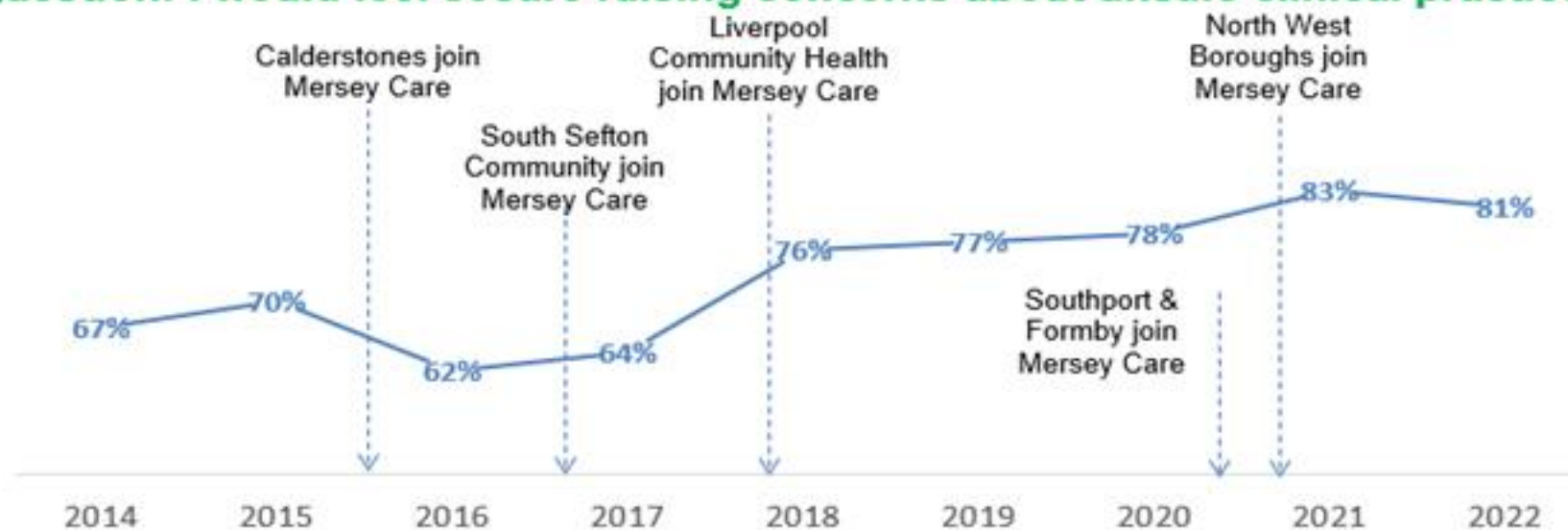
Initial reviews for people processes



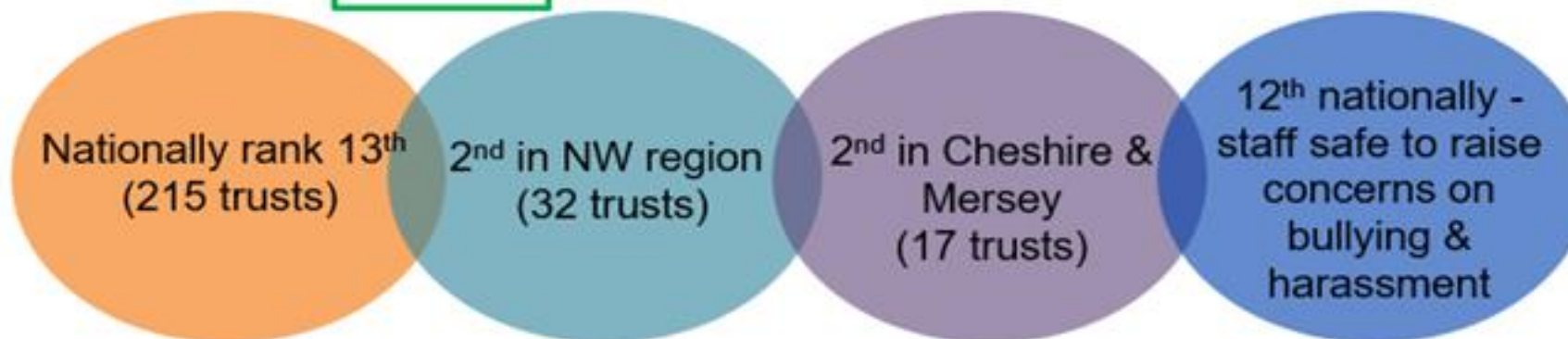
The Data Impact

Staff feel safer in raising concerns

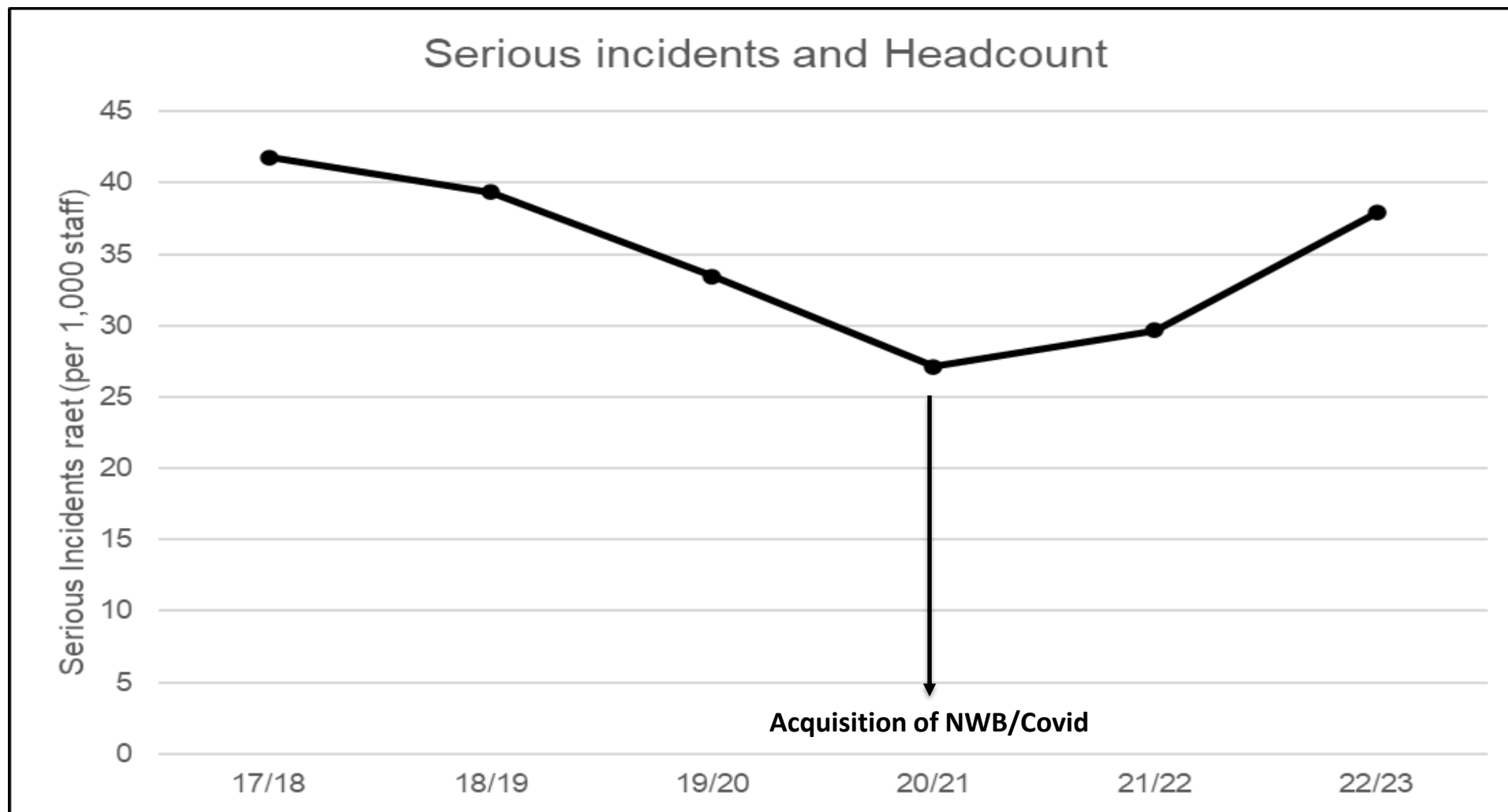
Question: I would feel secure raising concerns about unsafe clinical practice



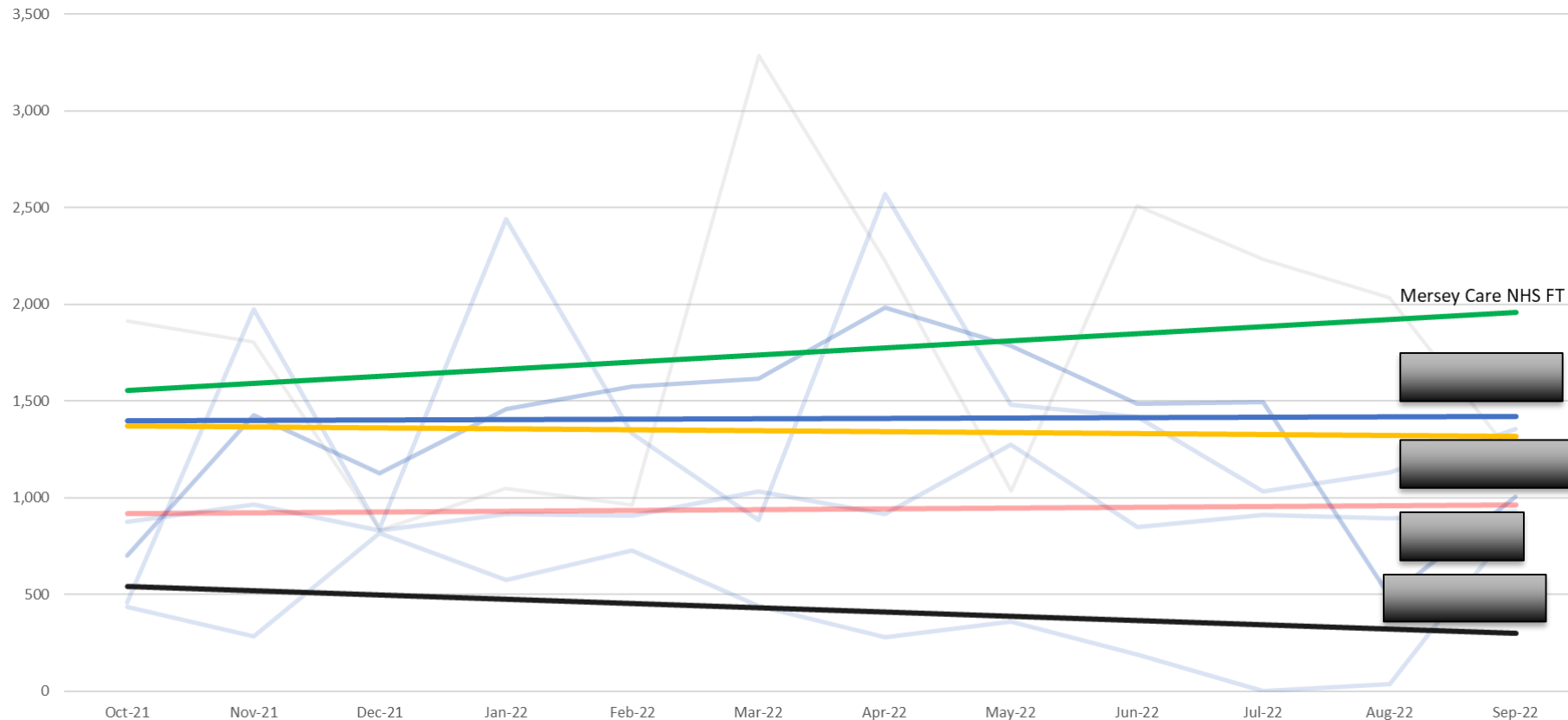
RJC starts



Serious incidents and Headcount



Incidents reported to NRLS show a positive trend both empirically and relative to neighbouring MH/LD&A/Community trusts (Oct 21 to Sep 22)



NB: The National Reporting and Learning System (NRLS) records monthly against the number of incidents uploaded onto the system, not the date the incident occurred, which causes the spikes in reporting. The linear average lines help to show a steady/maintained position of reporting, demonstrating a positive safety culture of reporting for MCFT compared to other local (comparable) Trusts and the NRLS average

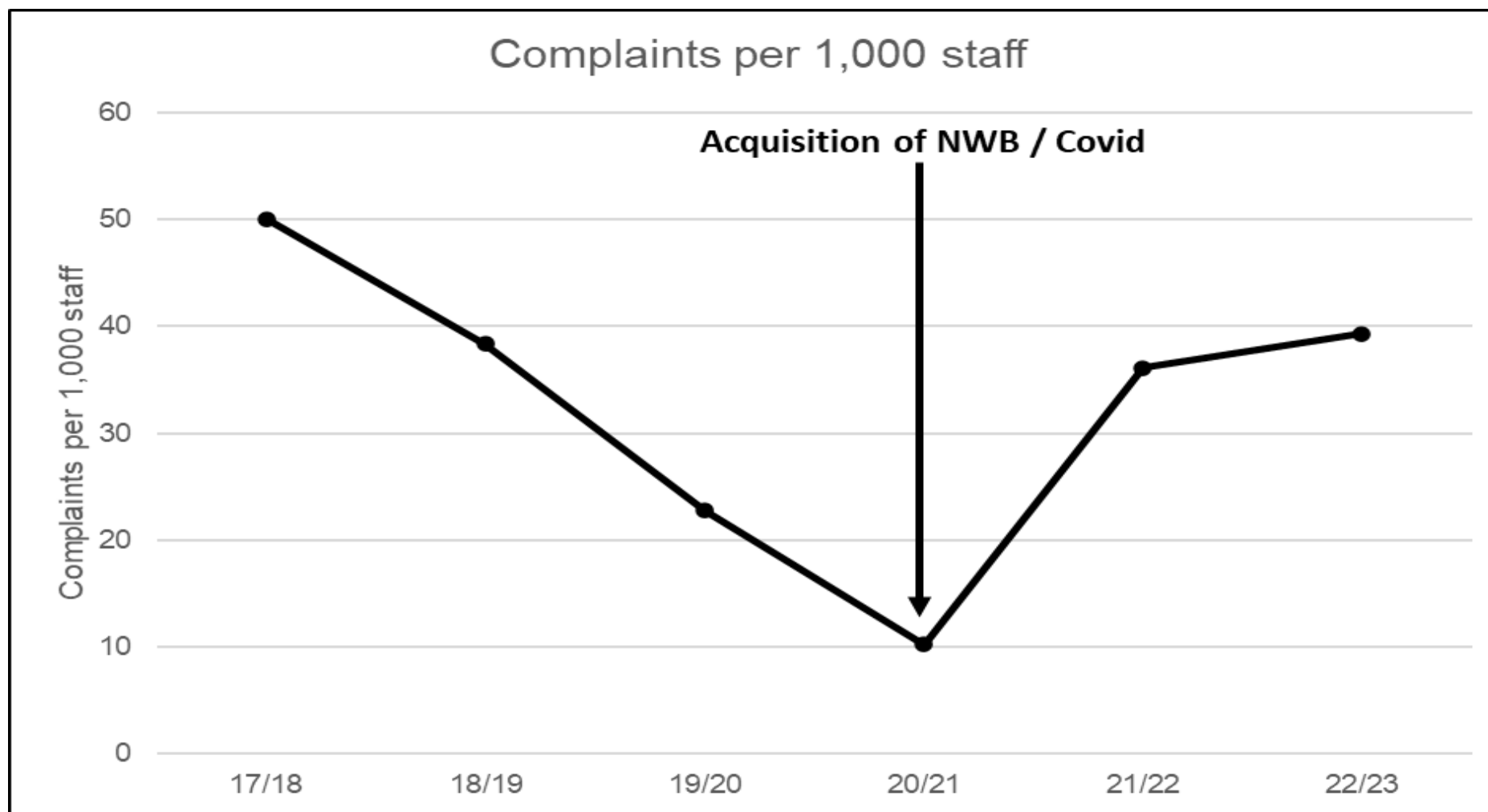
Learning review following a homicide (RCA)



The staff said...

“It was the best training session they have ever been to in 20 years of working in the Trust”

Number of Complaints v. Headcount





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What RJC implementation might look like and include

Implementation – what it might look like

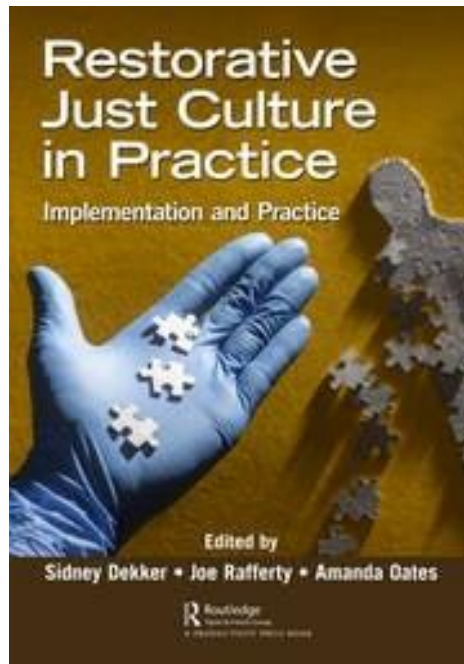
- Accountable lead
- Case for change
- Agree board alignment within strategy / operational plan
- Engage on concept, and meaning:-
- Establish a delivery group
- Agree terms of reference for the delivery group
- Agree priority areas / interventions/ communications
- Agree outcome measures, economic, qualitative
- Formulate Year 1 plan
- Review key policies and processes
- Conduct learning reviews
- Establish framework (4 step process)
- Produce annual report and report process for year 2

Evidence of a Restorative Just Culture

- Free flow of information between hierarchies were managers are “able” to hear bad news
 - It gets reported
 - They welcome it
 - They act on it in the sense of a Just & Learning Culture
- Disputes are discussed and settled
- Staff feels supported and heard
- Restorative language is used throughout
- Incidents are used to learn from
- Trusting attitude



A Call to Action - A Restorative Just Culture Manifesto



Be Inclusive



Co Produce



Design your
Organisation



Embed Civility,
Compassion &
Respect



Understand & Learn



Create
Psychological
Safety



Re-frame the
language



Support Staff &
Patient Wellbeing



Re-wire Leadership



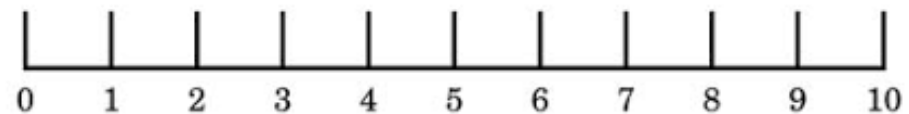
Invest in
Organisational
Health

Final thoughts

- Where are you personally?
- Where is your team?
- Where is your organisation now?

Unjust

Just



slido



Where are you personally?

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Where is your team?

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Where is your organisation now

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Summary

