

Nursing is like a game of CHESS... changing with every move...

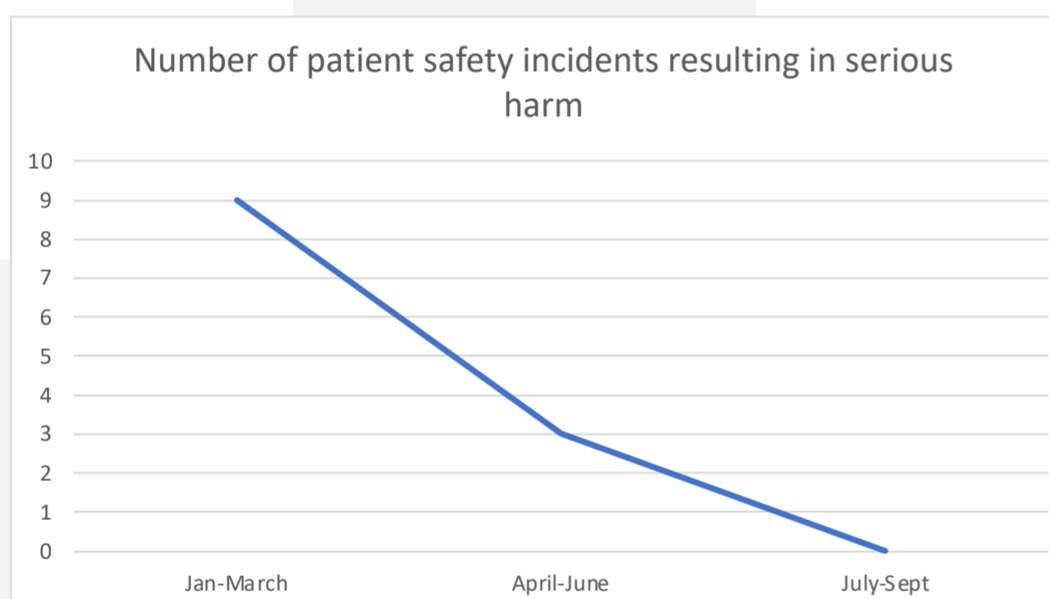
Introduction

In healthcare, we often see patient safety issues caused by a lack of psychological safety and the need to complete daily tasks whilst navigating the various challenges of our environment. The question asked by the Elderly care ward in 2022 was 'can we give every member of the team an opportunity to stop a process if they have concerns about patient and staff safety?' and so the CHESS project was launched

At the start of 2022, the Elderly Care wards at Sandwell General Hospital (Lyndon 4 and Lyndon 5) were struggling with low morale, poor staff retention, numerous patient safety incidents and were under a Chief Nurse review. When Joanne Thomas started in April she knew she wanted to change things and get the teams to a place where staff felt valued, everyone worked as a team and communicated effectively, and the safety of the wards was significantly improved.

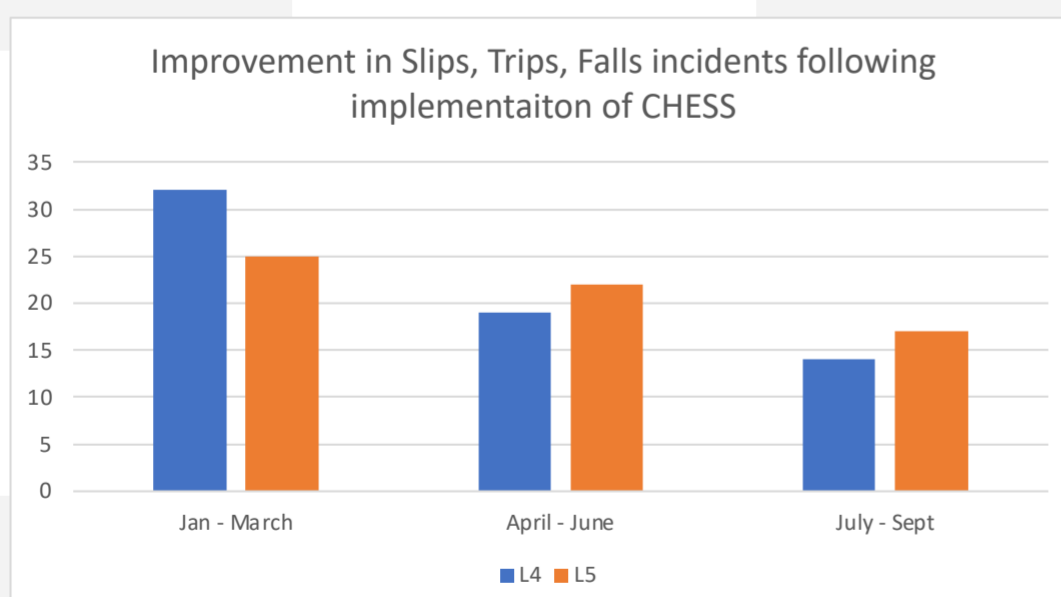
As with Chess, nursing helps you concentrate, improve your logic and problem solve in uncertain environments. Chess teaches you to take responsibility for your actions, and how you can use your pieces (staff) as a dynamic team to reach the same goal.

Improved compliance with best practice standards for Sepsis:
Following the introduction of CHESS, it can be seen that compliance with the SEPSIS 6 treatment pathway increased on both Lyndon 4 and Lyndon 5

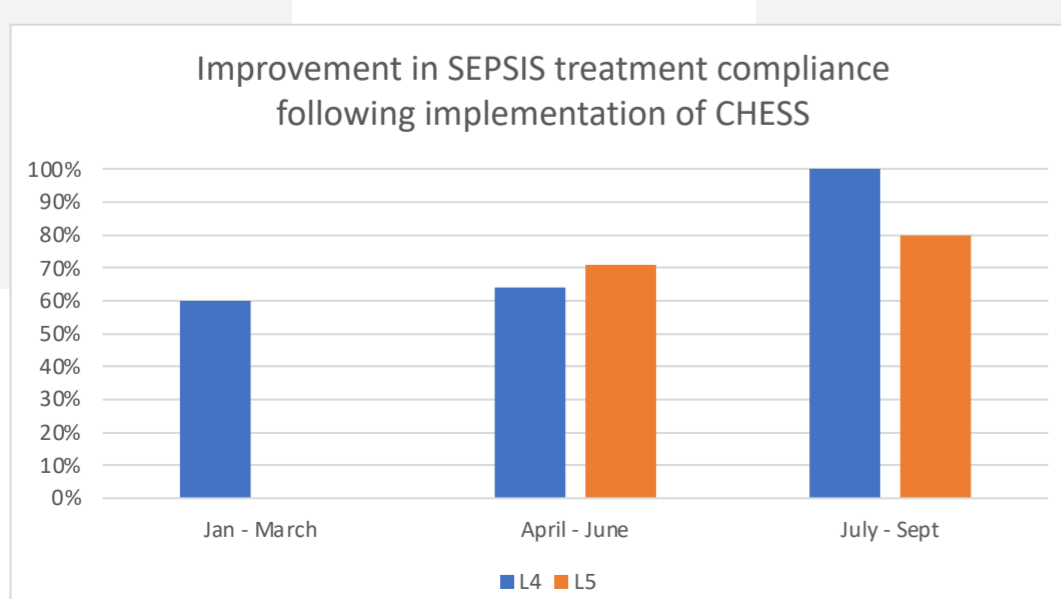


Number of serious incidents resulting in patient harm

	L4 & L5
Jan - March	9
April - June	3
July - Sept	0



	L4	L5
Jan - March	32	25
April - June	19	22
July - Sept	14	17



	L4	L5
Jan - March	60%	0%
April - June	64%	71%
July - Sept	100%	80%

The CHESS process

At 09:45 on both wards (L4, L5) 'CHESS' is called. All members of the team (apart from Drs completing ward rounds), get called to nursing station for a 5-7 minute quick evaluation about where staff need additional support.

At CHESS, we discuss acutely unwell patients and sepsis. The NIC can then move staff round to support wherever the gaps are, for example moving HCAs between bays to support observations, moving a qualified nurse to assist with washing and allocating student nurses to optimize their opportunities to learn. If we need to initiate Sepsis 6, NIC offers full support to ensure checkmate is achieved.

Another benefit of CHESS is to highlight vulnerable patients (e.g. those at risk of falls) so that everyone is aware of where additional support may be needed over the course of the shift. It is everyone's responsibility to ensure patient safety and support their colleagues.

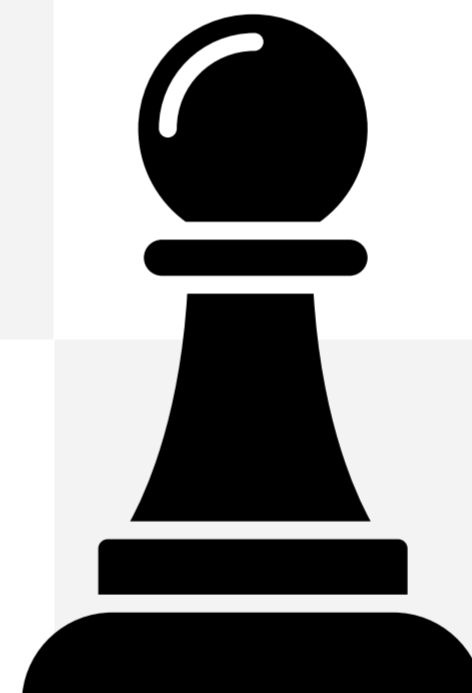
CHESS doesn't just happen at 09:45.

Anyone in the team can call CHESS at any time if they have concerns and feel the team needs to refocus, re-evaluate capacity and "move the pieces around".

It is also used to as part of debriefs after incidents, and to flag patients with potential Sepsis.

Chess is often used as a debrief following incidents - it empowers all staff including HCA/Ward Clerks/Doctors to call 'CHESS' in the moment of uncertainty and unplanned issues.

Staff have a voice and are all leaders.



Critical Hour Evaluating Staff Support

The aim of the game?
CHECKMATE

Patients are well looked after
No patient Safety Incidents
Happy staff who don't go home feeling burnt out

Staff feedback:

Feedback from staff indicate that CHESS is a really powerful tool in helping all team members feel valued.

Improvement with patient safety incidents: On Lyndon 4 and Lyndon 5, the introduction of CHESS saw a decrease in Slips, Trips and Falls incidents. There was also a significant decrease in the number of patient safety incidents resulting in serious harms across both wards.

What next?

To ensure the success of this project in the long term, all Ward Managers and NICs will be empowered to promote CHESS on their wards. Display space will be allocated on every ward and CHESS will also be integrated as a normal part of daily practice, including becoming part of daily safety huddles.