How to achieve safety excellence on elderly medical wards: A positive deviance approach

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The Positive Deviance approach

- Identify and learn from those who demonstrate exceptional performance
- Solutions to problems exist within communities
- Positive deviants succeed despite facing the same constraints as others
Bradley’s four stage process

**Stage 1:** Use routine data to identify positive deviants with exceptional performance

**Stage 2:** Use qualitative methods to generate hypotheses about how positive deviants succeed

**Stage 3:** Quantitatively test the hypotheses in larger, more representative samples

**Stage 4:** Disseminate the positively deviant strategies to others

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This applications of positive deviance:
• Focused on a broad safety outcome
• Explored exceptional performance within multidisciplinary ward teams
• Used a time and resource ‘light’ method

Background and aims

Aim 1:
How do behaviours, cultures, and dynamics facilitate the delivery of exceptionally safe patient care?

Aim 2:
What practical tools and strategies do multi-disciplinary teams use to deliver exceptionally safe patient care?

Aim 3:
Is it possible to identify what underpins positively deviant success with limited time and resources?
What we did

Multidisciplinary staff focus groups:
• 4 positively deviant and 4 comparator wards (n=70 staff in total)
• Blinded to performance levels

• Initial activity - Manchester Patient Safety Framework
• Semi-structured discussion
• Thematic analysis in 2 parts
Hypotheses: positively deviant behaviours

- Trust
- Learning from incidents
- Keeping patients / relatives informed
- Setting expectations
- Focus on discharge
- Feel able to ask questions or for help
- Knowing each other
- A multidisciplinary approach
- Integrated, ward based AHPs
- Working together
- Acquiring additional staff
- It’s a pleasure to come to work
- Directorate support
- Stable and static teams

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Learning from incidents

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Focus on discharge

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A multidisciplinary approach

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Integrated ward based AHPs
Stable and static teams

Junior Doctor on a PD ward
“...There seems to be very low turnover of staff on here. A very minimal dependency on agency staff. It think for all the medical wards I’ve visited this is the one that has the largest number of permanent staff that are here long term.”
Considerations

• Hypotheses must be tested
• Causality?
• Something not discussed ≠ it does not happen

Conclusions

• Focus groups effectively elicited positively deviant behaviours – but the analysis took time
• Testing and spreading these to similar wards may help improve safety
Thank you!
Any questions?

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