NHS Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

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The Walkway to Wellness – redesigning and embedding secure care services for offenders with intellectual and developmental disabilities using Normalization Process Theory

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Background:

National policy on secure inpatient and community services for offenders with IDD has changed substantially in response to Transforming Care, bed reductions [3], and the development of Provider Collaboratives for secure services. Consequently, this has changed the numbers and profiles of patients as well as the delivery of offender specific therapies.

Locally, the reorganisation of our services, including expanding geographical boundaries, has also had a significant impact. This necessitated changes to inpatient and community services, and a new model of care was designed in collaboration with service users and carers, named the "Walkway to Wellness" (W2W).

Normalization Process Theory (NPT) provided a theoretical basis for this study in understanding how W2W is becoming imbedded in routine practice [2], and has been used in over 100 studies to good effect [1].

Methods:

We used NPT to evaluate the implementation of W2W. This involved evaluating training materials & operational procedures via audit, and staff & patient questionnaires using the NOMAD model which supports NPT approaches.

Core Constructs of NPT:

Coherence: How people make sense of the problem of operationalizing new practice (e.g. I understand how the Model of Care can impact on the quality of patient care).

Cognitive Participation: Relational work used by people to create and maintain practice within a community (e.g. There are key people who drive the Model of Care forward and get others involved).

Collective Action: Operational work used by people to apply new practices (e.g. I can easily integrate the Model of Care into my existing work).

Reflexive Monitoring: How people assess and understand how new practice affects them and others (e.g. I value the effects the Model of Care has on my own work).
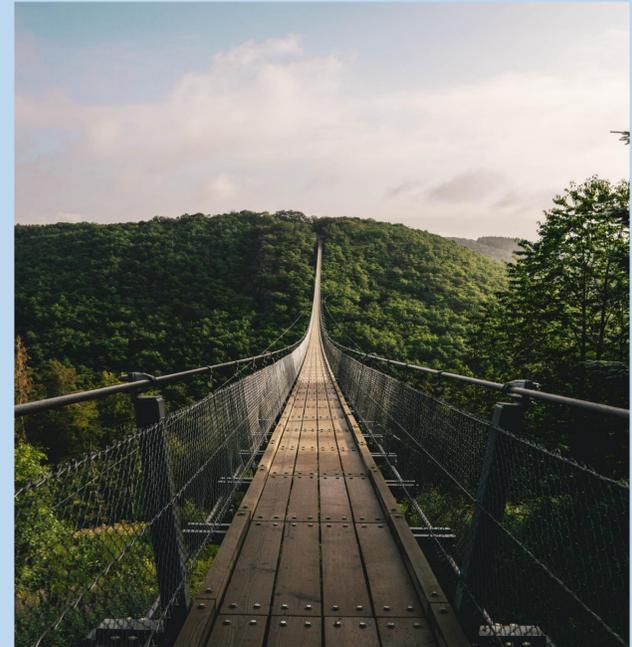
Conclusions:

Historically changes to services have been designed by clinicians in response to policy drivers, whereas here we have employed a collaborative approach with patients and carers. The baseline data in this evaluation will modify ongoing training roll-out and the way in which W2W is operationalised.

We plan to revisit the staff and patient/carer questionnaires in order to ascertain the progress of implementing W2W over the next twelve-months.

Results:

W2W staff training took place over a nine-month period, and by the end of 2020, the level of embeddedness and understanding of W2W concepts varied depending on whether the part of the service was driving the changes. Patients' understanding of the W2W model also varied at this stage with some patients having a better concept of the purpose of their recovery goals, with others needing more communication support from our team.

	Medium Secure		Low Secure		Hospital Based Rehab.	
	Mean	SD	Mean	SD	Mean	SD
Coherence	2.02	0.45	2.36	0.58	2	0.5
Cognitive Participation	1.57	0.54	1.94	0.3	1.6	0.55
Collective Action	2.47	0.58	2.6	0.38	2.34	0.46
Reflexive Monitoring	1.98	0.53	2.17	0.47	1.73	0.54

Note: Lower mean scores indicate greater reported normalisation of the model of care, with 1 being the greatest score.

Implications for practice:

- Highlights the need for "drivers" to pioneer changes in practice and mentor those in their area of working.
- Self-monitoring was an important part of the implementation strategy, which may provide a useful basis for future implementation in other areas.

References:
1. May, C. R., et al. (2018). Using normalization process theory in feasibility studies and process evaluations of complex healthcare interventions: a systematic review. Implementation Science, 13(1), 1-27.
2. May, C., & Finch, T. (2009). Implementing, embedding, and integrating practices: an outline of normalization process theory. Sociology, 43(3), 535-554.
3. Sinclair, N. (2018). Transforming care: problems and possible solutions. Tizard Learning Disability Review.