

PROMISE. Beyond Frontiers

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SUMMARY

The concepts underlying the PROMISE initiative are described. This initiative to implement more humane healthcare is now developing from a local initiative in Cambridge to a global movement.

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The exercise of force is incompatible with a vision of recovery. A caring response to distress underpins dignity and respect and paves the way for true enablement so people with mental health challenges can lead a life they want to lead and be self-determining. This ethos is the cornerstone of PROMISE (PROactive Management of Integrated Services and Environments). PROMISE began as an initiative to support staff and service users on a journey towards eliminating reliance on force in mental health services.

Following publication of the MIND report on Crisis Care in June 2013, PROMISE was conceived with a clear focus on understanding the scale of the problem as regards to Physical Intervention (PI) within Cambridge-shire and Peterborough NHS Foundation Trust (CPFT). So at inception the focus was on setting up systems around incident reporting and continuous auditing i.e. quantitative service evaluation. Qualitative research into positive and proactive care grew quickly into a new strand following publication of Department of Health guidance in April 2014. Since then PROMISE has expanded in its scope and has branched out considerably. Underlying this are some key insights that we have gained along the way.

- From PI to all forms of coercive / restrictive practice – overt force is the tip of an iceberg, for truly recovery oriented services the entire spectrum of force should be challenged.
- From incidents to antecedents – incidents are a proxy measure for lost opportunities so the focus shifted to person centred care, fulfilled staff and healing environments as ways of reducing PI.
- From inpatients to integrated pathways – 95% of the patient journey is in the community, thus 95% of lost opportunities for early assessment and early intervention is in the community, the best way to eliminate reliance on the exercise of force is to provide pathways in which patients do not get so unwell that they have to give up the driving seat.

The insights from our journey have been integrated with contemporary leadership and management theory into a co-produced model called PROCESS (PROduce Creative Effective Simple Solutions). It maps out the PROMISE change paradigm and provides a framework for leadership to lean on while navigating through the complex maze of service transformation. Within PROMISE we listed over 200 bottom up initiatives in 2014, an association can be drawn with the consistent 90%+ scores on patient experience. We are currently in the process of organising the innovations from the frontline into a coherent tool kit, The SPACE Programme, that others can replicate and contribute to. The tool kit will also contain implements to PROactively deTECT (PROTECT) incidents and a framework for PROactive Governance for REStictive Settings (PROGRESS).

PROMISE Local

PROMISE Local has taken the aspirations from within CPFT into the local health and social care economy. We are now bringing together organisations to commit to a change agenda that involves:

- Seamless care that prevents and proactively detects and delivers appropriate support
- A positive and proactive workforce for the future
- Communities that are more accepting of mental health challenges

We are working towards the 9th October to sign the Cambridge charter. At every level there are unique opportunities to work across statutory and 3rd sector, primary and secondary care, commissioners and providers, health and social care and so on. Education and training regionally could be changed to reflect these aspirations. We are in the process of aligning organisations across these fields.

PROMISE Global

PROMISE Global hopes to scale up and replicate these local solutions internationally. Cross-pollination

between Cambridge, Yale, Brisbane, Prague and Cape Town has helped PROMISE grow in its aspirations to create and share knowledge to ensure that every person receives positive, proactive and truly person-centred care. We hope our efforts will blossom into a global vision for local agendas. The various shapes and guises this might take will provide a rich kaleidoscope of experiential journeys to learn from. We will share and learn from each other's efforts, struggles and successes and we will challenge the status quo and be a catalyst for a new discourse that redefines frontiers of humane care. The World Psychiatric Association's congress in

November 2016 will form the platform for the PROMISE declaration which will be a global call for action.

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References

1. *Mind report on Crisis Care June 2013.*

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