

### Factsheet 11

## Case Study Guidance

We are asking you to produce a case study that summarises your work. This case study, in addition to being part of your re-certification, may be used in the following ways:

- 1. It may be shared with other organisations as a way to share good practice
- 2. It may be used to provide evidence of impact that RRN certified training has to potential new applicants and policy makers
- 3. It may be used for communication purposes

If it is shared all details will be anonymised, and most likely aggregated with other case studies, so that your organisation can not be identified.

If we do want to identify you, you will be contacted by one of the team and specific permission will be sought for the use of this information.

Your case study should follow the outline given below. A template has been made available on the <u>Bild ACT website</u>.

available of the blid ACT website.		
Title	Brief title for the case study that makes the content clear	
Subheading	A little more explanation of what this case study is about (if needed)	
Short description of the organisation	This case study was produced as part of the Bild ACT recertification process by [name of CTS].  Working in: England/Wales/Scotland/N Ireland/UK	
	<ul> <li>We are a:</li> <li>□ Commercial Provider (Only Train Out) Our organisation is commercial training provider who delivers training to a range of organisations.</li> <li>□ In-Service Provider (May Train Out) Our organisation is an in-service training provider – we develop and deliver the training within our own organisation, but we may or may not provide training to external organisations.</li> <li>□ In-Service Provider (Doesn't Train Out) Our organisation is an in-service training provider – we develop and deliver the training within our own organisation</li> </ul>	

	(tick one that is most appropriate)
	This case study is about delivering training into the following settings:
	<ul> <li>□ Specialist NHS services: e.g., Mental Health, Learning Disability, Autism or Dementia</li> <li>□ Acute NHS Services: e.g., General Hospitals, accident and emergency departments, inpatient and outpatient services</li> <li>□ Social care provider</li> <li>□ Education provider</li> <li>□ Security provider</li> <li>□ Transport provider</li> <li>□ Agency workforce</li> </ul>
	(tick as many as apply)
	This case study is about delivering training into services supporting: (please give details of your specific setting e.g. XXX NHS Foundation Trust, adults, children, etc)
	You can find out more about [name of CTS] here [hyperlink to website of training provider].
Summary of the case study	If someone only reads this section, they get a sense of:  • which topic the case study covers  • progress on restraint reduction (to include qualitative and quantitative information to evidence where possible)  • progress in relation to std 1.5  • progress in relation to promoting trauma informed approaches.  • progress in relation to assuring the quality of training delivery [including that of Affiliate Organisations, where applicable]  • what was existing practice like  • what was delivered and why  • the difference the training has made  [It may be easier to write this summary up at the end]
What training did you provide? What actions did you take?	Briefly outline the key aspects of the training you delivered and to whom:  Number of people trained  Who was trained  What the focus of that training was  Any other supporting actions you took, e.g. changes/
	updates to process/policy/values/mission/strategy.

Please be clear of the timeframe of the delivery e.g. from May 2023-May 2024

# What difference did this make? (Impact)

What's the difference that has been achieved as result of the training provided/changes made? Here tell us if there has been:

- A REDUCTION i.e., in the use of particular types of restraint, or in particular levels of restraint, in the number of complaints or reported injuries, in staff abstractions, costs incurred or some other tangible entity.
- AN INCREASE i.e., in reported staff confidence, in the quality of life reported by those being cared for, supported, or treated.
- AN IMPROVEMENT i.e., in service user engagement in the training development or delivery process, in multi-disciplinary co-ordination or in using debriefing to improve staff responses.
- SOME OTHER PROGRESS, CHANGE OR GROWTH, e.g., challenges surmounted.

Please provide evidence for your claims. Use numbers and stories.

#### 1. Quantitative data

- Make the data easy to engage with, use either charts, tables, graphs, maps, or infographics.
- Be clear about the source of your data

#### 2. Qualitative data

- This could include a story of a client that is dealt with differently now.
- Something about the difference it has made to your staff
- The difference it has made to your organisational culture and values

#### Use real quotes from staff and clients.

Please draw out in particular how the training has:

- enabled you to preserve and protect the physical and mental health of your client, and
- supported the change the Restraint Reduction
   Network Training Standards are designed to bring about:
  - Protect people's fundamental human rights and

	promote person centred best interest and therapeutic approaches to supporting people when they are distressed  Improve the quality of life of those being restrained and those supporting them  Reduce reliance on restrictive practices by promoting positive culture and practice that focuses on prevention, de-escalation and reflective practice Increase understanding of the root causes of behaviour and recognition that many behaviours are the result of distress due to unmet needs  Where required, focus on the safest and most dignified use of restrictive interventions including physical restraint.  (Please tick all that apply and give details)  You may also want to reflect, in what way/to what extent the training has enabled you to  increased lived experience involvement, support preventative messaging, embed trauma informed principles in your practice quality assure your training address issues of inequity/inequality  (Please tick all that apply and give details)  Please avoid making claims that the data doesn't support.
	There will likely be many variables at play so you may want to talk about <i>contribution</i> (rather than causality) the training has had to enable the change.
Pictures	The case study should include at least one image, featuring people where possible.
	Images should be landscape, a minimum of 2,000 pixels wide and in JPEG format. More advice on preparing images in this way can be found <a href="https://example.com/here">here</a> .
	Write a caption and alt text (clearly describing what is in the image including descriptions of people, setting, and any activities taking place) for image
	Please ensure consent to use this picture has been gained from those that feature in it.
Sign Off	I agree that the above is an honest and accurate representation of the work of the organisation. All the data referred to is accurate to the best of my knowledge.
	Name:

	Job title:
	Signature:
	Date:

Additional things to think about:

- The case studies should be between 500 and 1000 words
- Keep it concise: Use the template structure. Write in clear, accessible language. Short sentences. Bullet points, where useful.
- Technical language should be clearly defined at first use.
- Include quotes where possible/ relevant from participants/stakeholders etc.

Please note: Bild ACT will store case studies confidentially as personal data.

If you have any questions about case studies, please contact: <a href="mailto:certifications@bildact.org.uk">certifications@bildact.org.uk</a>