

Mental health trusts
Clinical/care team
Self assessment



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Chief Executive, Commission for Health Improvement, 103-105 Bunhill Row, London EC1Y 8TG.

Introduction

Background

The Commission for Health Improvement (CHI) has developed a number of self assessment tools to help NHS organisations review their clinical governance arrangements. These tools have been designed for use by specific teams and modified to meet the needs of different care sectors.

The three tools available are:

- a corporate management team tool focusing on issues of strategic capacity
- a senior management team tool focusing on issues of strategic capacity
- a clinical/care team tool focusing on issues of patient experience

CHI has decided to adopt a self assessment approach in **mental health trust clinical/care teams** within the clinical governance review process to:

- help teams identify their own clinical governance strengths and weaknesses
- encourage teams to share information, take stock and reflect, and challenge colleagues
- help teams to identify and take forward areas for improvement
- enable teams to understand more clearly the issues that are of interest to CHI
- provide the CHI team with important information about some of the clinical/care teams in preparation for the review site visit

About this self assessment tool

This self assessment tool is aimed at clinical/care teams working in a mental health setting. It has been designed to encourage participants to meet together and discuss issues relating to patient experience, such as clinical effectiveness and outcomes, access to services, organisation of care, humanity of care and environment.

The tool provides an opportunity for members of a clinical/care team to reflect on their clinical governance progress, think about areas for improvement and focus their improvement activity on areas that are relevant and important to the team. CHI will use the information from the completed self assessment to inform the review process. It will help CHI to gain a more complete picture of the trust and its teams.

Your team may also like to download the clinical/care team tool, and other tools available for mental health trusts, from the CHI website (www.chi.nhs.uk) to use on an ongoing basis to look at progress over time outside of the clinical governance review process.

Introduction

How this self assessment tool is constructed

This self assessment tool contains a number of sections.

A **series of statements** have been written to encourage you to reflect on how things actually happen within the team and the organisation overall, rather than focusing on the existence of formal structures, policies and processes. We realise that many of these areas may not be easy to assess objectively and so we expect to receive a lot of comments to qualify the assessments made.

There are **guidance points** which you may like to consider when reflecting on the statement. These are fairly extensive, but they may not all be applicable to your team.

A **comments section** gives you space to record the assessment of your progress, highlighting strengths and weaknesses and noting examples.

There are two **six point rating scales** which ask you to (1) agree where the team is with respect to the issues underlying the statement, and (2) reflect on your team's capacity for improvement, considering any internal and external constraints. The rating scales may help you think about where to concentrate your improvement efforts. If you repeat the self assessment in the future, outside of the clinical governance review process, the rating scales may also help you to monitor the progress you have made over time.

The **key areas for action** section enables you to record the most relevant and important areas for improvement that you have identified as a result of completing the self assessment tool.

Introduction

Who should complete this self assessment tool?

This particular tool is aimed at mental health trust based clinical/care teams. It is up to you to decide who to include in the team. Some of the people that you could involve are suggested below. This list is not exhaustive; there may be different people you wish to include. Not all of these may be applicable to your team.

- psychiatrists
- nurses
- occupational therapists
- other therapy staff
- administrators
- care assistants
- clinical psychologists
- social workers
- pharmacists

How should you complete this self assessment tool?

The following few paragraphs explain in detail how you should complete the tool, including ideas for preparation, and what to do once you have completed the tool.

Preparation for the self assessment

Your team should complete the tool collectively, having met and discussed it fully. You may find the following useful:

- sharing the tool in advance and encouraging members of the team to think about some or all of the statements before the meeting
- completing the tool during an existing meeting, for example, turn over a regularly scheduled team meeting to the self assessment
- setting up a series of shorter meetings
- considering breaking into small groups, (if your team is large), to discuss the statements, then feeding back to the whole team to form one response
- nominating a scribe (ideally someone who is familiar with the terminology and work of the team, but who is not part of the team or actively contributing to the discussion)
- nominating a facilitator (to monitor time and make sure that everyone is encouraged to contribute)

Introduction

Completing the self assessment tool

The tool should take you two to four hours to complete.

To complete the self assessment, please carry out the following steps for every statement:

- 1 Read the statement and the underlying guidance. Ensure that you are clear about what the statement is looking for.
- 2 Discuss as a team where you think you are in relation to the statement, using the guidance to structure your discussions. Identify your key strengths and areas where progress is most needed, and think about any constraints you face.
- 3 Note down the key points of your discussions in the space where you are asked for your comments, remembering to identify areas of good practice and where progress is particularly needed. Try to be as frank as possible and include specific examples.
- 4 Reflecting on your discussions, agree your position on the rating scales provided. Indicate the box that most closely represents your views.

Once you have completed all the statements, you should:

- 5 Review all of your responses and identify three key actions to take forward. These could then be integrated into other action planning cycles.
- 6 Return the completed tool as an electronic version to your trust's CHI coordinator (<INSERT NAME>) by <INSERT DATE>, who will return it to CHI. You might like to keep a copy of the completed self assessment for your records before returning it.

Using the self assessment outside of the clinical governance review process

Copies of this self assessment tool, and other self assessment tools suitable for mental health trusts, are available on the CHI website (www.chi.nhs.uk) for trusts to download and use outside of the clinical governance review process.

Rating scales

The six point rating scales

The generic description for each part of the two scales is shown below. It may help you to complete the ratings more easily if you keep this page visible while you complete the tool.

To what extent is this statement met for your team?	
Scarcely if at all	There are few, if any, examples where this is true, and our team has no plans to address this issue.
Slightly	There are few, if any, examples where this is true, but an approach is being developed, OR There are isolated examples of this being addressed.
Somewhat	There are increasing numbers of examples of this being addressed, and we are enthusiastic about development, but an approach is still being developed, OR An approach has been developed, but with the exception of a few enthusiasts there has been little uptake on the ground.
Substantially	The issue is increasingly being addressed. The area is still relatively new, and the methods for dealing with it have not yet been fully evaluated. The activities in this area are not always integrated.
Strongly	We have made significant progress towards addressing this issue. The methods are now evaluated and mature and we increasingly look for further development and adaptation. This is increasingly seen by staff as 'part of the job'. The activities in this area are usually, though not always, integrated.
Fully	This is integral to what we do. All staff recognise and are committed to the importance of the issue and it is always considered as part of the services we offer.

How much influence do you have to improve this situation?	
None	As a team, we have no influence over this issue. We are told what to do, how to do it and are managed on adherence to prescribed process.
Marginal	We do not have authority for this issue, and we have few channels of influence over those who could improve this situation.
Some	We have nominal authority for this issue, but this is not universally recognised and we have significant difficulties in making progress, OR We have no authority for this issue, but we have channels to influence those who do.
De facto	We do not have authority for this issue, but effectively we are able to influence most of what we do.
Strong	It is generally recognised that we have authority for this issue, but we usually need to negotiate solutions with others, and/or overcome significant factors outside our control.
Full	It is recognised that we have authority for this issue and are able to ensure that improvements are implemented and monitored.

Mental health trusts Clinical/care team The self assessment statements



Statement 1

Treatments and interventions we offer to service users and carers are based on the best available evidence¹.

Guidance

Consider for example: access to, and use of, information; guidelines and protocols; service models; multidisciplinary team working; role of lead clinicians; multidisciplinary clinical audit; research; complaints and adverse incidents; education and training, care pathways.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all Slightly Somewhat Substantially Strongly Fully

How much influence do you have to improve this?

None Marginal Some De facto Strong Full

¹ The best available evidence may include research, journal articles, audits, and learning from experience amongst other sources

Statement 2

We use a range of up to date clinical indicatorsⁱⁱ to monitor and improve outcomes for service users and carers.

Guidance

Consider for example: range of clinical indicators used; benchmarkingⁱⁱⁱ; audits within your team; other audits within the organisation; ways that learning is shared within and across teams.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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ⁱⁱ Nationally agreed measures to indicate how well an organisation is performing with special reference to clinical aspects of patient care

ⁱⁱⁱ A point of reference upon which you can measure future progress

Statement 3

Our team understands and manages the specific risks, including clinical, to service users carers and staff in our care environment.

Guidance

Consider for example: clinical risks particular to the service you provide; non clinical risk; risk identification and assessment; practices and procedures to minimise risk including reporting of near misses; reporting of incidents and action taken to 'close the loop' within and across teams; prevention and management of violence, including policy and training; policy and staffing levels for close observation, and control and restraint techniques; clinical risk management and assessment; appropriateness and implementation of clinical supervision policy; control and restraint policy and its implementation; arrangements for urgent police assistance.

NB: Issues related to an appropriate environment should be addressed through your response to statement nine.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all Slightly Somewhat Substantially Strongly Fully

How much influence do you have to improve this?

None Marginal Some De facto Strong Full

Statement 4

We have identified the needs, and recognise the rights, of those who use our service and we address them appropriately.

Guidance

Consider for example: needs such as cultural, spiritual, disability, dietary; rights such as respect, dignity, privacy, confidentiality; feedback from patient/service user/carer groups from different backgrounds/races on appropriateness of your service; feedback mechanisms relevant to these different groups; formal independent advocacy and its accessibility.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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Statement 5

We know what the waiting times and access issues are for our services and we have actionable plans to improve them.

Guidance

Consider for example: access to information; change management; team working within and across teams; the impact of referrals to and from other services; partnerships with the local health and social care community; access needs of vulnerable or marginalised groups.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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Statement 6

We communicate with service users and carers in such a way that they feel able to participate in their care, including being involved in decisions about treatment options, giving informed consent to treatment and care, and evaluating the care they receive.

Guidance

Consider for example: how well informed service users and carers are, including those with particular language and communication needs, and your team contribution to this; communication methods, skills and training across the team; individualised plans of care; process of consent giving including consent to participate in research^{IV}; duty of candour^V when things go wrong.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?					
Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
How much influence do you have to improve this?					
None	Marginal	Some	De facto	Strong	Full

^{IV} This may include consent to treatment and consent to being involved in research

^V Being honest, open and frank with patients/service users and carers

Statement 7

We work in partnership with service users and carers so they contribute to the planning, monitoring and evaluation of our services.

Guidance

Consider for example: how you involve service users so that they feel empowered to contribute; ways in which effective partnership working has been achieved; how you make feedback on your service known to others, such as stakeholders; how you judge the success of your partnership working.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all Slightly Somewhat Substantially Strongly Fully

How much influence do you have to improve this?

None Marginal Some De facto Strong Full

Statement 8

The team works effectively with other providers of health and social care so that service users and carers receive a high standard of continuing care and support.

Guidance

Consider for example: other teams with whom you work closely; your relationship with providers in the local health and social care community including voluntary services; how you assess the quality and appropriateness of the continuing care and support available to meet your service users' and carers' needs.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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Statement 9

We understand what is needed in our work areas to make them suitable for high standard of clinical and personal care, and have developed the environment accordingly.

Guidance

Consider for example: the different area where service users are cared for; care resources appropriate to individual needs including those related to race, sexuality and background; movement between clinical areas; facilities for carers and visitors; support services; environmental audits.

NB: Issues related to risk should be addressed through your response to statement three.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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Statement 10

We receive and act upon information about the quality of all aspects of the service we provide.

Guidance

Consider for example: how proactive you are in ensuring you receive information; diversity of sources including service users, carers, stakeholders, top management; diversity of methods including surveys, interviews, complaints, focus groups; action taken to improve quality; how well your team is doing compared to others.

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

Overall team rating

To what extent is this statement met in your team?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
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How much influence do you have to improve this?

None	Marginal	Some	De facto	Strong	Full
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Key areas for action

What three key areas for action have arisen from this self assessment?

It may help to identify your key areas for action by selecting the statements where the extent to which you meet the statement is low, and your influence to improve in this area is high.

Key area 1

Key area 2

Key area 3