THE FIFTEEN STEPS
CHALLENGE

Quality from a patient's perspective;
A mental health toolkit

CONTENTS

THE 15 STEPS CHALLENGE:
QUALITY FROM A PATIENT'S PERSPECTIVE; A MENTAL HEALTH TOOLKIT

1. BACKGROUND

The NHS is committed to putting patients at the heart of what we do and it was a mother's comment at a patient and family involvement workshop that kick-started the 15 Steps Challenge. She told us about her daughter, whose condition needed frequent inpatient stays. She said, "I can tell what kind of care my daughter is going to get within 15 steps of walking on to every new ward."

This mum was not a clinician or quality assurance manager, but very quickly she could tell some important things about the quality of care in the healthcare settings that she and her daughter were attending.

Her comment highlighted how important it is to understand what good quality care looks and feels like from a patient and carer's perspective. While this mother was describing her acute hospital experience, service users and relatives have told us that this principle is also true for mental health inpatient settings. Our service users have high expectations for safe, good quality care, delivered in welcoming and clean environments. This quote inspired the development of a series of 15 Steps Challenge guides.

"The 15 Steps Challenge" is a suite of toolkits that explore different healthcare settings through the eyes of service users and carers.

This version of the 15 Steps Challenge has been specifically developed for inpatient mental health care settings. With an easy to use methodology and alignment to NHS strategic drivers, these resources support staff to listen to service users and carers and understand the improvements that we can make. The toolkits help to explore patient experience and are a way of involving patients, carers and families in quality assurance processes. Additional support notes for secure mental health settings and children and young people's inpatient services can be found at Appendices D and E. These resources have specific material for these settings.

The 15 Steps Challenge toolkits were originally developed in 2012 by the NHS Institute of Innovation and Improvement. All of the toolkits and resources were developed in co-production with staff and service users to support patient and carer involvement in improving our health services. Used widely since their launch, the suite of 15 Steps Challenge tools have been refreshed by NHS England and stakeholder partners to take account of the new NHS guidance. Due to popular demand, we have also added a new toolkit for commissioners to the suite of resources.

The suite of toolkits includes:

1. The 15 Steps Challenge – **guidance for commissioners**

2. The 15 Steps Challenge – **inpatient services**

3. The 15 Steps Challenge – **mental health inpatient services**

4. The 15 Steps Challenge – **community services**

5. The 15 Steps Challenge – **children and young people's inpatient services**

6. The 15 Steps Challenge – **clinics and outpatients**

The toolkits are free to download from the NHS England website.

2. PURPOSE OF THE 15 STEPS CHALLENGE

2.1 First impressions count!

"First impressions are disproportionately important on mental health wards and the 15 Step Challenge astutely recognises this. This practical guide neatly walks teams through a process of identifying what would help make patients and visitors feel welcome and safe, not just on arrival but throughout the person's admission. 15 Steps will be a real asset to any ward"
Chief Executive, Bright

- When we first arrive in a healthcare setting, does it inspire confidence in the care that we are about to receive?
- How can first impressions make us feel that we will be safe and cared for?
- What are the first clues to high quality care?
- What does good care look, feel, sound and smell like?

The purpose of the 15 Steps Challenge is to:

- help staff, service users and others to work together to identify improvements that can be made to enhance the service user experience. It is a collaborative process and should include both staff and service user representatives.

- provide a way of understanding service users' first impressions more clearly and how this impacts on their initial experiences of care.

- support sharing of good practice.

The 15 Steps Challenge uses a variation on mystery shopping observational approaches to understand what service users and carers experience when they first arrive in a mental healthcare setting. A small "15 Steps Challenge team" visit wards and other service user areas and take note of their first impressions. The team includes staff and service users and/or carers working together. The team use the questions and prompt guides in the toolkit to support their observations and then give structured feedback about their experience, including what is working well and what could be improved.

By enabling service users' and carers' voices to be heard clearly, the tool can be used to gain an understanding of how people feel about the care provided, how high levels of confidence can be built and what might be done to increase service user confidence as part of a continuous improvement journey.

The 15 Steps Challenge IS NOT:

- a performance management tool or

- an audit (clinical, quality, safety or otherwise).

2.2 When should we use the 15 Steps Challenge tool?

"Overall, it is a great process and it was super to undertake the visits as a team of volunteers."

Experts by Experience and staff of 2gether NHS Foundation Trust

There is no set time for undertaking the 15 Steps Challenge. It is designed to support wider quality improvement work. The toolkits are flexible to fit in with different improvement approaches that your organisation is already using or might like to start implementing. It should be sponsored by senior leaders and form part of wider improvement activity.

Feedback has shown that the Challenge is useful in the following contexts:

- As an additional element to any existing programme of regular Board walkarounds;

- As part of a regular service user experience review;

- As a structured toolkit to involve existing service user participation groups or forums who are working with the organisation;

- As an additional component to any Patient-led Assessments of the Care Environment (PLACE) inspections that happen;

- Before formal quality assurance visiting, including Care Quality Commission (CQC) inspections, as an aid to see healthcare settings from a different perspective.

"This fits in so well with the work we are doing around the environment for people with dementia & our Caring for Carers."

Ipswich Hospital NHS Trust Senior Nurse, Dementia Care

3. HOW DOES THIS ALIGN WITH OTHER STRATEGIC INITIATIVES?

The 15 Steps Challenge has been developed to align and support a number of national strategic directions.

Care Quality Commission (CQC)

In every inspection the Care Quality Commission asks whether the service is safe, caring, effective, responsive to people's needs and well-led. They use a core set of quality standards, refreshed in 2014, in their inspection of health services. Evidence of good practice identified through the 15 Steps Challenge may be useful material to supply in support of a Care Quality Commission inspection, or the development of a Quality Account report.

The 15 Steps Challenge can support evidence for the following CQC standards:

- care and treatment must be appropriate and reflect service users' needs and preferences.
- service users must be treated with dignity and respect.
- care and treatment must be provided in a safe way.
- service users must be protected from abuse and improper treatment.
- service users' nutritional and hydration needs must be met.
- all premises and equipment used must be clean, secure, suitable and used properly.

NHS Five Year Forward View

The NHS Five Year Forward View describes how important it is to have communities involved in designing better health services. Involving patients and the public in shaping NHS services is a vital part of how the NHS improves the quality of healthcare.

The toolkit can be used alongside some other programmes of excellent practice:

- Royal College of Psychiatrists: Do the right thing. Ten standards for adult inpatient mental health care
- Star Wards – best practice in mental health inpatient care
- Triangle of Care – involving the carers of people with mental ill-health in their care

The 15 Steps Challenge seeks not to duplicate, but to align with and enhance these good practice programmes.

National Institute for Health and Care Excellence (NICE)

NICE have a range of national evidence based quality standards that support better patient care, including:

- "Quality standard for patient experience in adult NHS services: improving the experience of care for people using adult NHS services" (published 2012)
- "Quality standard for service user experience in adult mental health services" (published 2011, reviewed 2016)

Information and insight taken from 15 Steps Challenge feedback can help inform a staff team how they are doing against a number of areas detailed in the standards.

Royal College of Nursing

Several of the Principles of Nursing Practice describe putting patients at the centre of care, making sure they are respected, treated with dignity and as individuals.

4. IMPLEMENTING THE 15 STEPS CHALLENGE

"The first time you walk in you develop an opinion, if you don't get a good feeling about it, it puts up a barrier and affects your experience of future care."

Student mental health nurse

4.1 In summary

To get started with the 15 Steps Challenge, make sure you have a co-ordinator and senior sponsor, who can align the Challenge to wider service user experience and service improvement activity. Once you have recruited a small group of staff and service users/carers to be in your 15 Steps Challenge team, the team simply walk around the ward or clinical environment and stop and observe service users and staff in the ward areas. The team observe what it is like to be there from a service user and carer's perspective. The 15 Steps Challenge team use the headings and observation prompts in section 5 to help structure their thoughts and observations. The prompts encourage thoughts and discussions, they are not checklists. The Challenge team feedback to the ward staff and Challenge co-ordinator, who then plan how to share any good practice observed and address any suggested improvements. Then repeat regularly as part of a quality assurance process!

4.2 Further detail

| Action 1 Identify an organisation sponsor and project co-ordinator | Action 2 Identify your 15 Steps walkaround team and read the toolkit | Action 3 Use the toolkit in this publication and undertake ward walkarounds | Action 4 Feedback to the organisation sponsor and to the wards, sharing good practice | Action 5 Identify actions and next steps | Action 6 Repeat the Challenge! |

Action 1 Identify an organisation sponsor and a project co-ordinator

A senior sponsor within the organisation is essential. This might be the Director of Nursing or another executive lead. The sponsor ensures that the 15 Steps Challenge is aligned to strategic priorities for the organisation and supports a "Board to Ward" involvement. The senior sponsor's role is to champion the 15 Steps Challenge across the organisation. It is important to communicate with both the executive team and with frontline teams that the 15 Steps Challenge will be happening within the organisation. This preparation work is essential so that everyone is aware that it is a good way to get "fresh eyes" and service users'/carers' views on how to improve care. The Challenge offers a way for people to work together on improvement, it is not an audit! The organisation sponsor will also ensure that any corporate themes emerging from the Challenge can be addressed strategically.

The project co-ordinator is the day to day lead for the Challenge. They recruit and brief the 15 Steps walkaround team. They co-ordinate any feedback from the process and follow up on any actions identified. They should let staff know that the walkarounds are happening, although it isn't necessary to tell staff which wards or clinics will be visited.

Action 2 Identify your 15 Steps walkaround team

This is a small team of people who will undertake the ward walkarounds (the "15 Steps Challenge team"). It must include staff and service user representatives and it is good practice to include staff with different perspectives e.g. service user engagement leads, ward based staff, and therapists. Including non-clinical staff also brings valuable fresh eyes, for example, staff from human resources, estates or governance teams. Service user input can come from a range of sources, many current service users are happy to be involved in exercises like the 15 Steps Challenge. Alternatively the organisation may have a service user council or forum, or you could work with your local Healthwatch. The team should also include a Governor/Non-Executive Director and/or Executive Director. 15 Steps Challenge walkaround teams should aim to have three to four members, bringing different perspectives to each group. Aim to include a diverse group of people, for example disabled people and people of different ages and backgrounds.

The 15 Steps Challenge team should only need to meet together twice;

1) **Project "kick-off" meeting:** Usually takes place a few weeks before the day of the walkarounds. This meeting covers introductions and briefing the Challenge team. Ensure that everyone is clear about the Challenge purpose and introduce them to the toolkit. The 15 Steps Challenge team should be reminded that any information they hear from patients as part of the 15 Steps Challenge is confidential and should only be used for the purposes of the Challenge (your organisation may have a confidentiality agreement that can be used). It is useful to cover practicalities including how many and which wards will be part of the Challenge, dates and times of the walkaround, expectations on the day and any follow up that might be required.

2) **The Walkaround:** The team meet up to undertake ward walkarounds. Arrangements will vary according to how you are using the Challenge, but you might undertake four ward walkarounds weekly or monthly, or you might cover several departments over a day twice a year. After the walkarounds are completed, the team need to pass their feedback to both the wards visited and to the Project Co-ordinator.

The Project Co-ordinator may need to undertake some preparation, for example arranging the visitor permissions required for ward visits.

Action 3 Undertake ward walkarounds

Before the Challenge team start their walkarounds, it is helpful to have a quick re-cap. Ensure that everyone is clear about the toolkit and its purpose. It can be helpful for each team member to take on the role of focusing on one specific category.

- Ring the visitor bell to gain access to the ward (don't swipe in!).

- With your 15 Steps Challenge team take 15 steps into the ward (not always literally – the point is to walk into the main space of the ward environment and get a feel for how the ward operates).

- Let the nurse in charge know that you are on the ward and that you are the 15 Steps Challenge team. It is good practice to ask if there are any safeguarding concerns that put parts of the ward "off limits".

- Use your senses to build up your first impressions and then explore the ward further.

- The focus is on first impressions. What do service users and visitors see? What is important to them?

- Use the headings and observation prompts in section 5 to structure your thoughts and record your comments.

- Spending about 15 minutes on the ward is usually enough time to do this.

Explore the publicly visible spaces. What interactions can be observed? What do you notice that can be shared with other ward teams and spread to every ward? Absorb how the ward makes you feel.

Action 4 Feedback to the organisation sponsor and the ward team

After each ward walkaround the 15 Steps Challenge team should record their impressions (there is a template for this at Appendix B). Take some time to discuss what each person saw, felt and experienced. Team members will have noticed both similar and different things. Find a balanced view across the varied perspectives.

- The 15 Steps Challenge team jointly agree some key points to feedback.

- Share the highlights with the ward leader.

- Make sure the feedback includes the great things that were observed. Celebrate the positives; this is about sharing good practice!

- Ensure that the areas that could be improved are also identified.

- In addition to the feedback for each individual ward, can the 15 Steps Challenge team identify any key themes that are emerging across several wards?

- The team also feeds back to the Project Co-ordinator who will share findings with the senior sponsor.

Action 5 Identify actions and next steps

Agree actions that need to happen after the walkaround. If there was good practice to share, agree how this will be done and who will do it. There may be a number of improvements identified in the ward walkarounds that can be put in place quickly, some may be more complex. Agree what actions can be taken forward by the ward team, what needs to be taken forward by the Project Co-ordinator and where the organisation sponsor needs to have strategic input. You can use the template at Appendix C to do this.

Action 6 Repeat the Challenge!

The 15 Steps Challenge is designed to support a continuous improvement approach. Repeat the ward walkarounds at regular intervals. Regular reviews with walkaround teams will help ensure that good practice is rapidly shared. It also ensures that improvements are identified and are taking place. Regularly taking the time to hear service users' and carers' perspectives will support them to feel confident in their care from the outset.

"Environments need to be clean and tidy, not chaotic, they should have a relaxed, homely feel, and you can tell a lot from the way staff are with you, how they interact with you can give you reassurance straight away."

Service user, children and young people's mental health services

4.3 Practical tips for the ward walkarounds

The walkarounds should be unannounced, but its useful to alert the staff teams that the 15 Steps Challenge is happening about a week before the walkarounds – it can be useful to use the template poster for staff and patients in Appendix A.

Remember to brief the 15 Steps Challenge team on your infection control procedures, so that they observe hand hygiene and other important safety requirements.

Even before walking into the ward area spend some time noticing the entrance area – what is it like, is there useful visitor information, is there information about protected mealtimes, does the entrance way feel cared for?

Walk approximately 15 steps into the ward. Note: all wards are different – sometimes 15 steps might only take you half way down an entrance corridor. This will provide useful information, but keep walking! The point is to get to the main area of the ward. Observe what is around you as you go. Make sure you let the ward manager know that you are on the ward and who you are.

Stand quietly for a few minutes and have a good look around taking in what you notice from your different senses. What you smell and hear can be as important as what you see. Try not to get caught up in the detail of the toolkit at this point, really focus on your first impressions.

Once you have absorbed information quietly and independently, spend some time looking closely at the details. Look at the notice boards, the information on cupboard doors, and any equipment that is stored in spaces open to public view. What do you notice about the activities of staff and service users going on around you? Be courteous and do not intrude, but observe how people interact.

You may wish to have short conversations with staff and service users if this has been agreed in advance with your 15 Steps Challenge team.

Beware of assumptions as you do your walkarounds. For example, the flustered person at the reception desk might not be the receptionist, but someone who is covering for five minutes while the usual receptionist is away from the desk. If in doubt, ask.

Often there are areas and times (for example protected mealtimes) that are not visible to the 15 Steps Challenge team, however, there is usually information about these areas and times – poster information, pictures and checklists on cupboards. These will all contribute to your sense of how the ward operates.

The headings and observation prompts in section 5 give examples to look out for and aid discussions about how care is being delivered. It is important to note that care settings will vary in order to meet the needs of the service users in that particular environment.

Do not forget to record your positive impressions as well as areas that could be improved. Let the ward manager know when you are leaving the ward and if you have seen some particularly good practice, let them know straight away!

4.4   Practical tips for giving feedback

Constructive feedback is important. Identify someone in the 15 Steps Challenge team who will give the feedback, and ensure that they have the skills for delivering constructive comments. Feedback to the ward team on the same day is vital. Remember, they have been under scrutiny from the 15 Steps Challenge team and this makes everyone anxious. Make sure that the ward leader hears the team's comments as soon as possible. Give feedback verbally and agree if further written information would be helpful.

Good feedback is:

- *timely*
- *constructive and honest*
- *courteous*

Golden rules for feedback

1. Avoid delays - delays in feeding back can result in reduced momentum and power of the recommendations.

2. Plan in advance how you are going to give feedback – who will do this from the 15 Steps Challenge team?

3. Encourage staff to feel part of the process in advance so that it doesn't feel like a "them and us" situation.

4. Encourage the recipients of feedback to undertake their own self-assessment before giving feedback from patient stories e.g. "What do you think patients are saying specifically about how they experience our service?"

5. Provide non-judgemental feedback which is truthful, direct and constructive.

6. In feeding back, offer some positive examples, followed by some recommendations for improvement and end with some positives. This is a constructive way to deliver feedback.

7. Enable recipients to give feedback on how they found the process and the feedback to understand how it could be more effective.

8. Ensure that there is an opportunity for staff to action plan based on feedback and they have ways to share good practice.

(Adapted from Royal College of Nursing, Workplace resources for practice development)

5. THE WALKAROUND – WHAT TO LOOK OUT FOR PROMPTS

Aligned with CQC standards and evidence about what matters to service users, the Challenge toolkit asks the team to explore the quality of care under four headings;

Welcoming	Safe	Caring and involving	Well organised and calm

Each of the headings follow the same format. There are some questions and prompts help your observations. These are not designed to be used as a checklist or "clipboard" exercise but to help you to structure some of the quality indicators that you may have subconsciously noticed.

Welcoming

Questions to ask yourself	Comments
• Using my senses – what can I hear, smell, see, feel, touch? • How does this ward make me feel? • What is the atmosphere like? • What is the physical environment like? • What interactions are taking place between staff and service users? • Is there visible information that is useful and re-assuring? What is it? • What have I noticed that builds my confidence and trust? • What makes me less confident? • How long did I have to wait to enter the ward? **Things to look out for** • Welcoming signs or welcoming information available. • Acknowledged by staff - eye contact, smiling, greeting you. • Time and attention given to people entering the ward. • Staff introducing themselves. • Service users able to approach staff. • Staff photo boards with names. • Body language of staff. • Visiting times displayed. • Contact details for the ward visible. • Area available for visitors. • Staff dressed appropriately.	**What behaviours did I see that did, or did not, give me confidence?**

Walkaround undertaken on...

by ....(names of 15 Steps team)

Ward:...

Safe

Questions to ask yourself	Comments
• What aspects of safety can I see? • Is information visible that tells me about the quality of care and its link to safety? • Can I identify staff? How are they identifiable? • What tells me that staff take safety seriously? • What did I experience that made me feel safe? • How are medicines managed on the ward? • What have I noticed that gave me confidence? • What makes me less confident? **Things to look out for** • Information boards with transparent safety information e.g. safety crosses, graphs and charts. • Reader friendly data displayed and understandable. • Identifiable staff, with badges or lanyards clearly visible. • Fire doors shut. • No clutter or overflowing bins. • Staff in communal areas. • Equipment and environment well maintained. • Security and fire procedures evident. • Protected mealtimes. • Separate male and female areas. • Staff interacting with service users. • First aider identified. • Protected time/area for staff to dispense medication. • Staff following hand hygiene procedures. • Sharps appropriately disposed of.	**What behaviours did I see that did, or did not, give me confidence?**

Walkaround undertaken on...

by ....(names of 15 Steps team)

Ward:...

Caring and involving

Questions to ask yourself	Comments
Questions to ask yourself	**Comments**

- What can I understand about the service user experience on this ward?
- Is there evidence that service users and carers are involved in their own care?
- How do staff interact with service users?
- Is the routine of the ward evident for service users and visitors?
- How is privacy and dignity maintained?
- What can I see about meeting the needs of diverse service users?
- What information is available about more support e.g. mental health forums, carer groups, PALS?
- What have I noticed that builds my confidence?
- What makes me less confident?
- Do I get a sense of community?

Things to look out for
- Staff and service users positively interacting.
- Meaningful activities taking place.
- Information visible about what to expect at different phases of treatment.
- Service users speaking positively about staff and the care being received.
- Staff acknowledging service users and visitors with warmth and kindness.
- A social presence.
- Activities suitable for all ages.
- Open ended questions being used.
- Information about how to complain and compliment.
- Service user feedback displayed openly.
- Named nurses identified.
- Appropriate language used.
- People not being patronised or put down.
- Able to identify nurse in charge for that shift.
- People being kept informed e.g. delays.
- Staff having time for service users.
- Signs that equality and diversity needs are being met.
- Staff available to discuss care and progress being made.
- Information about carer groups.
- Service user support information/contacts available.

**What behaviours did I see that did, or did not, give me confidence?**

Walkaround undertaken on...
by ....(names of 15 Steps team)
Ward:...
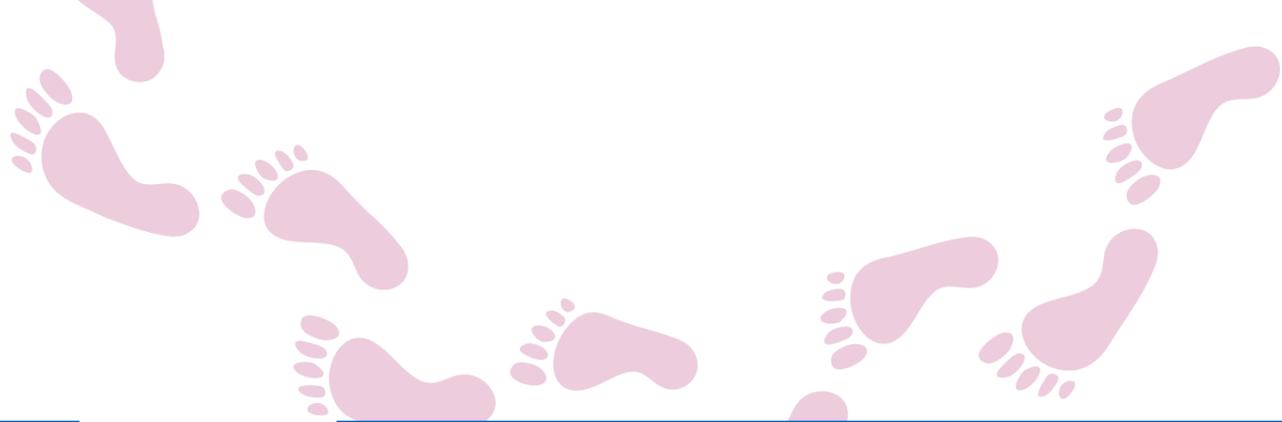
Well organised and calm

Questions to ask yourself	Comments

- Does the ward feel calm even though it may be busy?
- Are resources/equipment stored in designated places?
- Can I see colour coding or clear labelling for items?
- Is the environment well managed?
- What are the noise levels like on the ward?
- Does it feel like a therapeutic environment?
- Can I identify different areas of the ward?
- What can I tell about teamwork?

Things to look out for
- Noise levels e.g. loud music, slamming doors.
- Staff not looking like they are under pressure.
- Organised and tidy communal areas.
- Notice boards have up to date and relevant information.
- Evidence of a well organised ward.
- An uncluttered clean environment including the nurses' station, communal areas, kitchen etc.
- Positive comments from service users and carers.
- Clear signage to rooms, toilets etc.
- Service users and visitors looking relaxed.
- Ward protocols displayed.
- Reasonable temperature.
- No raised voices.
- Information is visible and organised on communal boards.

What behaviours did I see that did, or did not, give me confidence?

Walkaround undertaken on...
by ....(names of 15 Steps team)
Ward:...
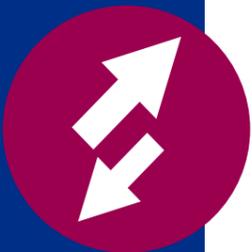
Use this section to highlight any additional themes to observe that are important to your own organisation:

Questions to ask yourself	Comments
(Agree these with the 15 Steps Challenge team in advance) Remember to ask questions about how this priority made you feel, what your senses can tell you from first impressions, what behaviours and interactions are linked. **Things to look out for** (What would service users, relatives and visitors notice about this priority from their first impression?)	

Walkaround undertaken on...

by ....(names of 15 Steps team)

Ward:...

5. FROM FEEDBACK TO ACTION

Having identified what is working well, where there are good practice ideas and what can be improved, it is important to make sure good practice sharing and improvements actually happen.

1. Using the feedback from individual wards and the key themes that have emerged from the Challenge as a whole, the Challenge co-ordinator **decides with the ward leaders and the organisation sponsor** what actions will be taken at a ward level and what actions are needed at an organisation wide or strategic level.

2. **Record** what the actions are, who is taking these forward and by when. There is a template to help you do this at Appendix C.

3. **Identify and celebrate the positives** – agree how the good practice will be shared and promoted (e.g. via ward meetings, an organisation newsletter, emails celebrating good practice). A vital part of the 15 Steps Challenge is the rapid sharing of good ideas that other teams can replicate.

4. **Be clever about your action plan** – you may wish to develop an action plan specifically for the 15 Steps Challenge. However, wards can sometimes be inundated with action plans for a wide range of initiatives – can some of the identified actions be linked to existing action plans, for example training plans or estates maintenance plans? This way there is an existing process to ensure actions are done, monitored and reviewed.

5. **Review the actions at an agreed date.** Revisit the ward walkarounds regularly. Agree to repeat the 15 Steps Challenge within a specific timescale. This will help keep track of the progress and improvements that are being made within the organisation.

6. EMBEDDING A PROCESS OF CONTINUOUS IMPROVEMENT

The 15 Steps Challenge is designed to support continuous improvement. It is not a one-off activity but should be regularly repeated. The way in which the 15 Steps Challenge is embedded will be different for each organisation, dependant on processes, structures and opportunities that already exist. The toolkit is designed to be flexible to fit in with local opportunities.

- Agreeing an organisation wide approach to regular 15 Steps Challenge walkarounds; what wards will be visited, over what time interval. Some organisations have decided to visit all of their wards in one day and repeat this every six months. Other organisations have decided to randomly select wards to visit every week, fortnight, or quarterly to get a flavour of patients' views. Others have decided to add the 15 Steps Challenge to existing activities, including monthly "Quality Walkarounds", "Board to Ward" days, weekly "frontline focus" days, or have added it to the cycles of PLACE inspections.

- Visiting wards that are receiving lots of positive service user and carer feedback and wards that have received complaints – what can be learnt and shared?

- Developing "You Said....We did....." information boards for ward areas. This helps to inform service users and visitors of the improvements that are being made and gives real examples of how service users' views are listened to and acted on.

- Making this a part of the PALS and complaints response – where appropriate ask those who have complained to be part of a 15 Steps team identifying improvements.

- Involving a wide range of service users and carers in the 15 Steps Challenge teams. Ask former service users/carers if they would like to get involved, some organisations have asked current service users for their input. One idea is to ask current service users to focus on one area each (e.g. "Welcoming" or "Safe") and ask them to apply the 15 Steps Challenge to their experience.

- Undertaking ward walkarounds at different times of the day for example visiting times or evenings. How does the service user/carer experience change?

- Exploring the difference between wards that are delivering different types of care/specialist units – often there are creative ideas that can be shared from one area to another.

- Developing a pool of 15 Steps Challenge team members. Over time, having a pool of people will make sure that the visits and time commitments are shared by many people and not just a few. It will reduce the number of briefings that are required. It also ensures a large pool of "fresh eyes".

"Initially the challenge visits were met with trepidation, but the immediate feedback with our positive experiences as well as areas for development has proved to be most valuable and appreciated. The written feedback provides excellent evidence for their Provider Compliance Assessments."

**Professional Development Nurse,
Berkshire Healthcare NHS Foundation Trust**

7. NEED HELP?

For more information and copies of the other 15 Steps Challenge Toolkits visit the NHS England website.

Contact us:

The Public Participation Team,
NHS England,
Quarry House,
Quarry Hill,
Leeds
LS2 7UE

e-mail: england.nhs.participation@nhs.net

APPENDIX A - TEMPLATE FOR A WARD POSTER FOR STAFF AND SERVICE USERS

VISITORS, CARERS AND SERVICE USERS – WE NEED YOUR HELP!

The 15 Steps Challenge

"I can tell what kind of care my daughter is going to get within 15 steps of walking on to a ward"

quote from parent

What did you think when you first arrived on this ward?

We know that there are lots of important elements to excellent care, and we believe that first impressions count. A good first impression builds confidence and reassurance. We want to get this right for service users, carers and staff.

To help us do this we are working on our **15 Steps Challenge**. This means that we are working with service user representatives and others to help us identify what works well and what can be improved on our ward. You may see this group visiting our ward. Please feel free to talk to them about your experience and ideas.

If you have comments and ideas, you could also talk to _____ on our ward, who can make sure that your feedback is added into our 15 Steps Challenge.

THANK YOU FOR YOUR HELP

APPENDIX B - 15 STEPS CHALLENGE FEEDBACK TEMPLATE

The Reviewers: ....

Ward area:.. Date:..

Welcoming:

Positives	Recommendations

Safe:

Positives	Recommendations

Caring and involving:

Positives	Recommendations

Well organised and calm:

Positives	Recommendations

Overall themes and comments:

APPENDIX C – ACTION PLAN TEMPLATE

Completed by: .... Date: ....

WELCOMING:

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

SAFE:

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

CARING AND INVOLVING:

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

WELL ORGANISED AND CALM:

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

APPENDIX D SUPPORTING NOTES FOR SECURE SETTINGS

We recognise that it takes more than 15 Steps to get to the heart of the ward and this is particularly true in secure settings.

This Appendix was co-designed with secure unit nursing staff, service users, carers, reception staff and security staff all inputting their expertise into key differences that are applicable to secure settings. However it was also recognised that many elements are the same regardless of setting such as the need for quality care, good communication and the four categories that the tool focuses on. Therefore, there are some additional prompts that people using the tool may want to consider as they perform the ward walkaround.

Questions to ask yourself

- How did you find the security procedure?
- How confident did you feel that personal belongings are stored appropriately (applies to visitors and service users)?
- Did you feel you had enough information about what to expect in that setting?
- How was the experience for you before you got onto the ward?
- What impact did the physical barriers have on your visit?
- Do you feel service users are empowered on the ward?
- If you felt anxious, was reassurance given?
- What did you notice about the reception and waiting area?
- What did you notice about confidentiality?
- What gave you confidence and made you feel safe?
- Who was your first point of contact on the ward e.g. qualified staff, health care assistant?
- Did you feel it was a therapeutic environment?
- What was the atmosphere like on the ward?

Things to consider

- Front of house – managing queues, waiting, queries, reducing frustration.
- Staff interaction with service users in communal areas and on the ward.
- Escorting staff – were you spoken to on the journey, was reassurance given if needed?
- Management of personal property – service user and visitor.
- Minimising the feeling of security procedures being intrusive.
- Pat down procedure explained.
- Gender appropriate staff performing pat down.
- Information about family visits that include children.
- Visitor information displayed – visiting times, contraband items and ward contact details.
- Ward information packs.

APPENDIX E SUPPORTING NOTES FOR CHILDREN AND YOUNG PEOPLE'S SETTINGS

Children and young people have particular care needs and have their own view of what constitutes good quality care.

This appendix was co-designed with children and young people that have accessed mental health services, who provided their expertise in highlighting some differences and additional things to look out for.

The main four categories in the toolkit will be applicable to children's and young people's settings but there are some additional prompts that the Challenge team may want to consider as they perform the walkround in these settings.

Questions to ask yourself

- Does the environment appear suitable for the age group?
- Does the reception area feel welcoming?
- Could you find the ward/setting without asking for help?
- Is the setting homely?
- What gives you confidence that children and young people are involved in their care?
- What did you notice about the waiting area?
- Did you feel that age appropriate resources were available?
- Did you feel it was a therapeutic environment?
- What access to kitchens/soft drink/snacks are available?
- What information can you see that explains treatment in that unit?
- What are the levels of noise?
- Do you feel that staff treat the children and young people as individuals?
- Can you identify staff and their job role?
- What gave you confidence that made you feel safe?
- Are staff interacting with young people sensitively?

Things to consider

- Staff, children and young people interacting together.
- Seating – enough comfortable seating, spacious area.
- Magazines available.
- Gaming consoles with appropriate games to play.
- Children and young people's art is displayed.
- Easy to follow signage.
- Visitor information displayed – visiting times, contact details.
- Information packs for new arrivals.
- Support information available – other services, specialist support.

ACKNOWLEDGEMENTS