

## Appendix 3 Ward peer review guidelines

**March 2019** 

Evidence	required	and	source:

To be found in notes highlighted in blue
Risk register
Business continuity plans
Environmental audit
Medicine fridge temperature monitoring system
Supervision template
Supervision audit
Team meeting agenda
Estates file and maintenance folder
Fire log book
Training
Service user welcome pack

KLOE	Areas to consider with staff	Comments and observations
CARING	How are service users involved in care planning?	
C1. Are people treated with kindness, dignity, respect and compassion while they receive care and treatment?	How are care plans individualised and copies provided to service user and carer with consent?  Is service user's consent to the sharing of clinical information	
C2. Are people who use services and those close to them involved	outside the team (including with carers) recorded? If this is not obtained, are the reasons for this recorded?	
as partners in their care?	Does the service user have access to independent advocates to provide information, advice and support, including	
C3. Do people who use services and those close to them receive the support they need to cope	assistance with assessment, advance statements and Care Programme Approach reviews?	
emotionally with their care, treatment or condition?	Are carers involved in discussions about the service user's care and treatment including discharge planning?	
	Are carers advised on how to access a carer's assessment by an appropriate agency?	
	Are carers given time to discuss concerns, family history and their own needs?	
	Are carers referred to appropriate support groups?	
	What protocols are in place to respond to carers if the service user doesn't provide consent to their involvement?	
	Are service users treated with compassion, dignity and respect?	

	Is contact/visiting times and other information for relatives and visitors visible? Are private areas for visiting available when appropriate?  Is there evidence of designated lounges and bathing facilities?  Is information available for patients and carers in a clear and user-friendly format?	
	Is information about how to complain and compliment is visible?  Is patient feedback displayed along with the actions taken?	
	Is there evidence of a protected mealtimes poster?  Are fresh fruit and cold drinks readily available?	
FFFOTIVE	· · · · · · · · · · · · · · · · · · ·	
EFFECTIVE	Are service users offered evidence-based pharmacological	
E1. Are people's needs assessed and care and treatment delivered	and psychological interventions and are exceptions documented in the case notes? What are they?	
in line with current legislation, standards and evidence-based	Is there a capacity assessment appropriate to specific decisions? Are carers and others involved in this process?	
guidance?	Have consent forms been signed?	
E2. How are people's care and treatment outcomes monitored and how do they compare with other services?	Do service users have a comprehensive assessment which includes mental health / medication management/ psychosocial needs? Are assessments documented, signed/validated and dated by the assessing practitioner?	
E3. Do staff have the skills, knowledge and experience to deliver effective care and	Is service user's physical health monitored?	

## treatment?

E4. How well do staff, teams and services work together to deliver effective care and treatment?

E5. Do staff have all the information they need to deliver effective care and treatment to people who use services?

What is the team's model of care?

Does the service undertake physical health assessments for all service users and do these include lifestyle questions? Does the team monitor the physical health of those patients receiving high dose antipsychotic medication?

Do all service users have a diagnosis and clinical formulation?

Are care plans holistic and person centred, and reviewed regularly?

Are care plans clear and measurable with clear evaluations linked to them?

Does the team hold MDT meetings and what is their purpose?

Does the team provide information, signposting and encouragement to service users to access local organisations for peer support and social engagement such as:

- Voluntary organisations;
- Community centres;
- Local religious/cultural groups?

Does the team have the appropriate training to carry out the interventions?

What is the team's training strategy?

Ask individual staff:

Have you had the training required to support the patients on the ward?

	Have you completed training in MHA/MCA?  How do you ensure patient records are kept confidential?  Have you completed IG training?  Do you receive supervision in line with the organisation's policy?	
	Is there an information welcome pack for service users?	
RESPONSIVE	Are service users asked if they and their carers wish to have copies of letters about their health and treatment?	
R1. Are services planned and		
delivered to meet the needs of people?	Does the service have access to translators and interpreters and the service user's relatives are only used in this role in	
R2. Do services take account of the needs of different people, including those in vulnerable circumstances?	exceptional circumstances?  Does the team sends a letter detailing the outcomes of the assessment to the referrer, the GP and other relevant services within a week of the assessment?	
R3. Can people access care and treatment in a timely way?	Are lessons Learnt Key Cards shared across services?	
R4. How are people's concerns and complaints listened and	What is the complaints procedure and are service users made aware of this?	
responded to and used to improve the quality of care?	How much time do staff spend with patients?	
	(ask named nurses) How much 1:1 time do you manage to have with patients?	
	Does the patient have the ability to make a phone call?	

	Is regular activity provided during the day and evening?	
	Is there a way to identify the numbers of delayed discharges?	
	Is there evidence of service users being offered a drink during visit?	
SAFE SA Are there are a teffin a levele?	Is there an identified duty doctor available at all times. Are they able to attend the team base within 1 hour.	
S1. Are there safe staffing levels?  S2. Are lessons learned and improvements made when things go wrong?	Has there been a review of the staff members and skill mix of the team within the past 12 months? Did this identify any gaps in the team? Is there a a balanced workforce which meets the needs of the service?	
S3. Are there reliable systems, processes and practices in place to keep people safe and safeguarded from abuse?	Does the service have a mechanism for responding to low staffing levels, including:  1. A method for the team to report concerns about	
S4. How are risks to people who use services assessed and their safety monitored and maintained?	staffing levels; 2. Access to additional staff members; 3. An agreed contingency plan, such as the minor and temporary reduction of non-essential services?	
S5. How well are potential risks to the service anticipated and planned for?	Are there systems in place to ensure that staffing is sufficient, and caseloads are covered and monitored when members of the team are absent for planned or unplanned periods?	
	What systems are in place should the team be unable to meet the safe staffing levels?	
	Do staff know how to report incidents and receive feedback about incidents?	

Are staff aware of the risk register and the identified risks for their area?

Do staff know how to escalate risks to the register?

How are risk monitored?

Are risk assessments in place and reviewed?

Are crisis contingency plans in place?

Is PMVA training up to date?

Are staff trained in techniques to ensure patients can be supported in an emergency?

How effective are the arrangements for responding to external safety alerts, recalls, inquiries, investigations or reviews? Are these audited?

Are there systems in place to monitor or review interventions for rapid tranquilisation and restraint?

Does the care plan reflect changes in care following rapid tranquilisation or restraint?

Are you trained in safeguarding adults and children?

What is the process for escalating safeguarding?

Do staff feel able to raise any concerns they may have about standards of care?

Are you aware of the safe storage of medicines?

Is there a system in place to monitor missed doses?

Is there evidence of room and fridge temperature charts for safe storage of medicines?

Is there signage for informal patients which reads: 'Patients who are not legally detained in hospital have the right to leave at any time. They are not required to ask permission to do so but may be asked to inform staff when they wish to leave the ward'?

Are the blanket restrictions in place reviewed regularly?

Are all staff carrying a personal alarm?

## **Environment**

Is there a well maintained, appropriate environment (e.g. non-slip) and walls, floors, windows and ceiling all clean?

Is the equipment stored tidily and managed, e.g. colour coded, staff return equipment after use, stock cupboards are clearly labelled – including 'visible' management (photos of content)?

Is there PAT testing dates on equipment?

Is there a general good state of repair?

Is there a couch in the clinic for physical examinations?

Is there a cleaning schedule?

Is there a ligature risk assessment room by room? What is the mitigation and how is this shared with staff?

	Is lockable storage accessible for patients?	
	Is the nurse call alarm system operational?	
	Is the environment dementia friendly?	
	Is an audit of environmental risk conducted annually and has a risk management strategy been agreed?	
	Has an infection prevention and control assessment been completed?	
	Are there clear lines of observation throughout the ward?	
WELL-LED	What are the vision and values of the organisation?	
W1. Is there a clear vision and a credible strategy to deliver good quality?	Are there effective communication systems to share information in a timely manner?	
quanty.	Do staff feel positive and proud to work in the organisation?	
W2. Does the governance framework ensure that responsibilities are clear, and that quality, performance and risks are	Are there clear responsibilities, roles and systems of accountability to support good governance and management?	
understood and managed?	Do all levels of governance and management function effectively and interact appropriately?	
W3. How does the leadership and culture reflect the vision and values, encourage openness and transparency, and promote good	Are there clear and effective processes for managing risks, issues and performance?	
transparency, and promote good quality care?	Are there processes to manage current and future performance? Are these regularly reviewed and improved?	
W4. How are people who use the service, the public and staff	Are there clear and robust service performance measures	

## engaged and involved? that are reported and monitored? W5. How are services Are information technology systems used effectively to continuously improved and monitor and improve the quality of care? sustainability ensured? Are there robust arrangements and confidentiality of identifiable data, records and data management systems, in line with data security standards? Are lessons learned when there are data security breaches? Are the people who use services, the public, staff and external partners engaged and involved to support highquality sustainable services? Are there systems to support improvement and innovation work, including objectives and rewards for staff, data systems, and processes for evaluating and sharing the results of improvement work? How would you describe your team lead? Do you know who they are above your direct line manager? Do you feel able to be open and honest about issues with all senior managers? Is there a risk register for the team and appropriate escalation protocols? Have the staff completed the appropriate statutory and mandatory training?

Do all staff receive supervision including the night staff. How

is this monitored?

KLOE	Areas to consider with the service user	Comments and observations
CARING	Are you involved in care planning?	
	Have you received copies of your care plan?	
	Have you given consent to the sharing of clinical information outside the team (including with carers)?	
	Do you have access to independent advocates to provide information, advice and support should you require this?	
	Are your carers involved in discussions about your care and treatment including discharge planning? Do you feel they are listened to?	
	Are carers advised how to access a carer's assessment from an appropriate agency?	
	Are carers given time to discuss concerns, family history and their own needs?	
	Are carers referred to appropriate support groups?	
	Have you been treated with compassion, dignity and respect by the team?	
	Do you feel that any concerns and issues you raise regarding your care are listened to and acted on?	
	Do you feel part of the decision-making during meetings with staff?	

	Are all interactions with staff treated in a confidential manner?
	If so, are you given the time and privacy to do so?
	Do you feel friends and family members are encouraged to
	visit frequently?
<u>EFFECTIVE</u>	Do you feel your rights are respected?
	Are your rights explained to you?
	Have you been given enough support to help you make important decisions?
	Do you feel your information is kept confidential?
	Were you asked who you were happy for your information to be shared with?
	Did you sign a consent form?
RESPONSIVE	Do you know who your named nurse is?
	How often do you see your named nurse in the week?
	Have you been informed of the complaints procedure?
	Could you understand the information leaflets that were provided?
	Do the staff use jargon?
	Were you asked if you and your carer could have copies of letters?
<u>SAFE</u>	Do you know if you have had a risk assessment?
	Have you been involved in assessing your risks?

	How do the staff respond to you if you fee frightened or upset?
	Are you receiving medication? Was this discussed with you?
	Do you know what it is for? Have you been given information about this?
	Do staff ask you if you are having any side effects?
	Do you feel safe while on the ward?
	If anyone on the ward was bullying you, would you know what to do and who to report it to?
	Do you think there are enough staff on the ward?
WELL-LED	Do you think staff are confident, and appropriately trained to respond with to your needs/concerns?
	Do you think the staff work well as a team?