

# The national Culture of Care programme

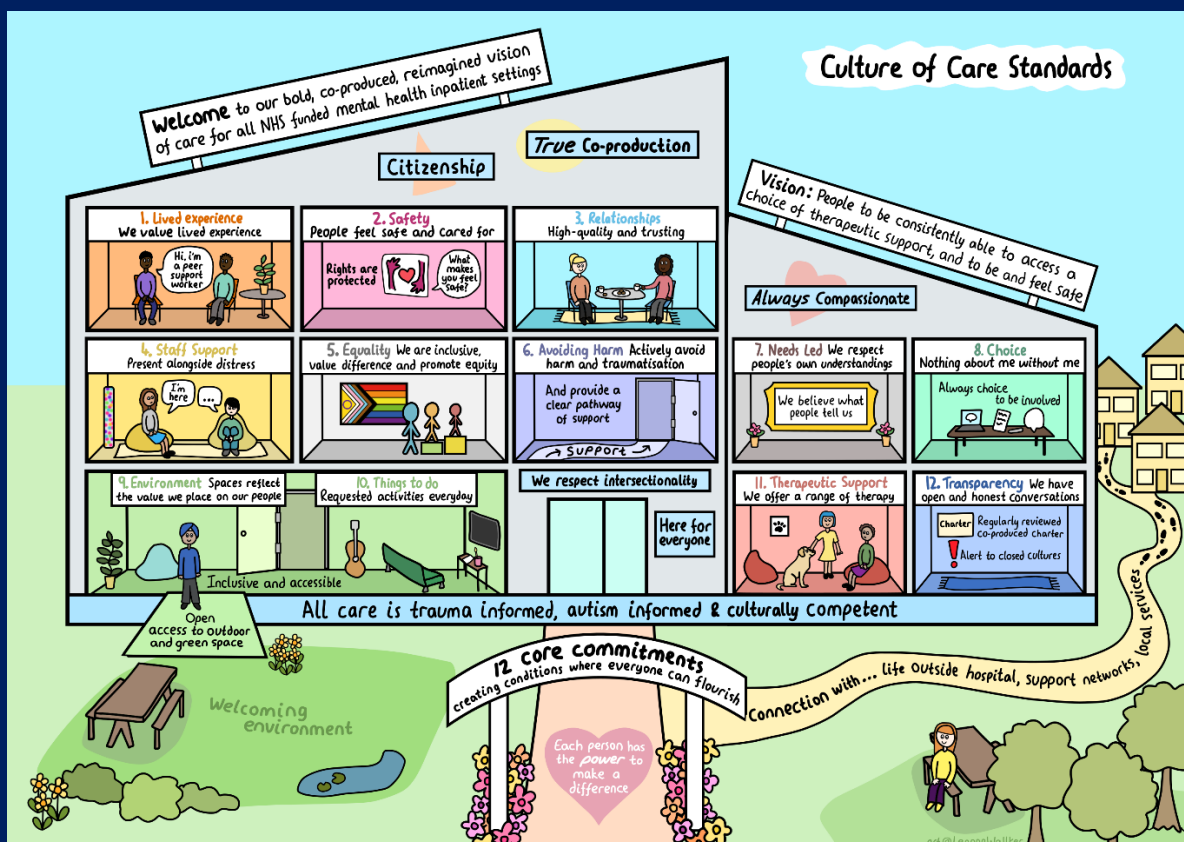
## Information for patients, carers and families

In 2022 NHS England set up a programme of work to improve the care people experience in mental health, learning disability and autism services where people need to be hospital. Some people have not been cared for properly whilst in hospital and some people have even experienced harm in hospital. This programme is about making changes so people receive the best care possible.

NHS England listened to patients, families, carers and staff who explained that the culture in hospitals is what needs to change. They produced a set of standards (like a list of values) which show what is most important so that we can work together to make hospital a safe place where people feel supported and cared for.

These standards are called the [National Culture of Care Standards](#) and are made up of twelve core commitments and three equity standards.

This diagram, drawn by Leanne Walker, an Expert By Experience, shows those standards;



NHS England wants everyone working in inpatient mental health, learning disability and autism services in England to embed these standards in their hospitals. NHS England has asked a range of organisations to help them to make these standards a reality. When you hear people talk about the Culture of Care programme it may be about one of six pieces of work that are happening shown in the table below.

### Ward level support

#### **1. Quality improvement for ward teams**

With the help of an improvement coach, wards will spend two years trying out and testing change ideas to improve care. The impact of the changes will be measured in a number of ways, including listening to people's experience of care on the ward. Ward project teams will include a mix of staff and patients and carers.

#### **2. Care and support for ward staff**

We know that working in an inpatient ward, seeing people in such pain and distress every day and feeling responsible for keeping them safe can be very difficult for staff.

Ward staff and managers and experts by experience, will be working together to think about their own ward team's awareness and skills. This work will support ward staff to work on improving the way they relate to their work, to one another and to patients and it will also help staff to focus more on building caring relationships with patients.

#### **3. Leadership and development for ward managers**

Ward managers will be given the opportunity to learn more about creating person-centred cultures of care. This will be done through training programmes that have been co-produced and will be co-delivered with people who have lived experience of mental health services.

### Executive support

#### **4. Coaching for executive directors**

Executive directors are responsible for overseeing mental health hospitals and they make high level decisions for a number of wards. That's why a selection of them will receive coaching and advice from both a leadership coach and a lived experience advisor.

The leadership coach is someone who has worked as a leader in mental health and can share that wisdom and knowledge. The lived experience advisor is someone with experience of using mental health services and can use this knowledge and experience to train and

advise senior decision makers. The lived experience advisors are employed by [Black Thrive Global](#) and [Neuro diverse Connection](#).

This coaching and advice will help very senior people who are responsible for mental health and learning disability and autism hospitals to make decisions that are in line with the culture standards and this will help them to model good care and collaboration to other staff members.

## Organisational support

### **5. Quality improvement work across organisations**

With the help of a quality improvement coach, different teams across organisations will receive help to try out change ideas in order to embed the standards.

This means it is not just ward teams that are trying to embed them but also corporate teams like HR, nursing and governance, estates, communications etc

### **6. Moving away from risk stratification**

When mental health staff are worried about someone's safety, they tend to use a risk assessment questionnaire to find out how likely it is that someone is going to harm themselves or others. We now know that this isn't an effective or humane way to find out if someone is in danger so ten pilot organisations in the first year will be supported to move away from doing risk assessments.

Instead, staff will be supported to do collaborative, personalised safety plans with patients and families. These will help staff and patients think about what people need to be, and feel safe, on a ward.

After the ten organisations receive this support in the first year, the learning will then be shared with all other providers.

Culture change on wards will only happen if it is done in partnership with experts by experience, patients and their families. If you would like to get involved in the Culture of Care work, please get in touch with your local mental health, learning disability or autism hospital or local trust or provider.

To find out more about the organisations who are delivering the work please click on the links below.

- [\*\*National Collaboration Center for Mental Health\*\*](#)
- [\*\*The Foundation of Nursing Studies\*\*](#)
- [\*\*The Public Service Consultants\*\*](#)