



# Accreditation for Acute Inpatient Mental Health Services (AIMS)

Issue 1 - April 2007

We are delighted to bring to you the first of our bi-annual newsletters. We hope that they will prove a valuable tool for keeping you informed of the project's progress, as well as a means of sharing recent news on the topic of acute inpatient care. We hope that many of you will wish to contribute to the newsletters by providing information from your local area.

If you have any comments, suggestions or news, please do get in touch:

AIMS

The Royal College of Psychiatrists'  
Centre for Quality Improvement  
4th Floor, Standon House  
21 Mansell Street  
London E1 8AA



020 7977 4994/6647    AIMS@cru.rcpsych.ac.uk

## Membership Update

### Pilot Phase

The 16 wards that took part in the pilot phase of AIMS undertook their self-review data collection in summer/autumn 2006, and the peer-review visits took place in winter 2006/2007. The AIMS Accreditation Advisory Committee (AAC), the body which makes recommendations on accreditation status, has now met on three occasions.

The first ward to be accredited was **Collingwood Court, Newcastle**, who had their accreditation confirmed by the Royal College of Psychiatrists' Education, Training and Standards Committee on the 6th of February 2007. Congratulations to everyone on the team at Collingwood - it is an incredible achievement, of which you should all be proud. And it just goes to show that it can be done!

### Wave One

Wards from all over the UK and Ireland are steadily signing up to AIMS. At the time of going to press, we have **48 member wards** from 22 separate Trusts/organisations (details on page 2). Self-review data collection is well underway, with the first peer-review visits due to take place in June.

We are, however, always on the lookout for new members! If you know of anyone who might be interested in joining, please ask them to contact us (details above) or visit the website:

<http://www.rcpsych.ac.uk/AIMS>



### The AIMS Steering Group (taken at final meeting, 17/1/07)

Back Row, L-R: Norman Young, Yvonne Stoddart, Mark Beavon, Sarah King, Elizabeth Moody, Helen Bennett, Paul Lelliott.

Front Row, L-R: Marion Janner, Rachel Christian-Edwards, Anna Burke, Jo Cresswell.

[Other members not present: Godwin Calafato, Rob Chaplin, Ian Gallon, Peter Jarrett, John Hanna, Terry Randles, Dawn Talbot, Adrian Worrall]

## AIMS Member Wards - March 2007

### Channel Islands

States of Jersey Adult Mental Health Service	Orchard House, St. Saviour's Hospital
--	---------------------------------------

### England NHS Services

Cheshire and Wirral Partnership NHS Trust	Beech Ward, Bowmere Hospital
Cornwall Partnership Trust	Fletcher Ward, Bodmin Hospital
Cumbria Partnership NHS Trust	Hadrian Ward, Carleton Clinic Beckside Ward, Furness General Hospital
Dudley Primary Care Trust	Clent Ward, Bushey Fields Hospital Kinver Ward, Bushey Fields Hospital Wrekin Ward, Bushey Fields Hospital
Kent & Medway NHS & Social Care Partnership Trust	Amherst Ward, Priority House Ash Ward, Little Brook Hospital Brocklehurst Ward, Priority House Woodlands Ward, Little Brook Hospital
Lancashire Care NHS Trust	Stirling Ward, Parkwood Warwick Ward, Parkwood
Manchester Mental Health & Social Care NHS Trust	Grafton Ward, Manchester Royal Infirmary
North East Lincolnshire Primary Care Trust	Diamond Suite, Diana Princess of Wales Hospital Sapphire Suite, Diana Princess of Wales Hospital
Northumberland, Tyne and Wear NHS Trust	Bede 1, South Tyneside District Hospital East Willows, Cherry Knowle Hospital Lamesley Ward, Queen Elizabeth Hospital <b>Collingwood Court, St. Nicholas Hospital (accredited)</b> Ward 21, North Tyneside General Hospital Warkworth Ward, St. George's Park
Nottinghamshire Healthcare NHS Trust	Ward A43, Queen's Medical Centre
Plymouth Teaching Primary Care Trust	Bridford Ward, Glenbourne Unit Harford Ward, Glenbourne Unit
South Essex Partnership NHS Foundation Trust	Boleyn Ward, Runwell Hospital Chalkwell Ward, Runwell Hospital Grangewaters Ward, Basildon Mental Health Unit Westley Ward, Basildon Mental Health Unit
Surrey and Borders Partnership NHS Trust	Delius Ward, Epsom General Hospital Elgar Ward, Epsom General Hospital
Sussex Partnership NHS Trust	Rothermay Ward, Eastbourne District General Hospital Woodlands Ward, Conquest Hospital

### England Independent Sector

Affinity Healthcare	Thoburn Ward, Middleton St. George Hospital
St. Luke's Hospital Group	Beech House

### Ireland

Health Service Executive (West)	Psychiatric Unit, University College Hospital, Galway
---------------------------------	---

### Northern Ireland NHS Services

Armagh and Dungannon Health & Social Services Trust	Ward 6, St. Luke's Hospital
Down Lisburn Trust	Department of Psychiatry, Lagan Valley Hospital Finneston House

### Wales NHS Services

Cardiff and Vale NHS Trust	Gorwel Ward, Llanfair Unit East 5A Ward, Whitchurch Hospital Newid Ward, Llanfair Unit Tresaith (East 2A) Ward, Whitchurch Hospital Rawnsley Unit, Llanfair Unit West 3 Ward, Whitchurch Hospital
North East Wales NHS Trust	Hafod Ward, Wrexham Maelor Hospital Hendref Ward, Wrexham Maelor Hospital

# Reflections of being a Pilot Ward for AIMS

Louise Flynn (Ward Manager) & Mary Morgan (Deputy Ward Manager)  
Cardiff & Vale Mental Health Services

It was with great trepidation that we received the news from our line manager that we were going to be leads for a new project being piloted on the acute wards. AIMS sounded like an up-to-date version of Bullseye. However, all became clear when it was explained that AIMS stood for Accreditation for Acute Inpatient Mental Health Services.

We were immediately interested and our first thoughts were the benefits for the patients and the wards. We as nurses strive everyday to improve standards of care and enhance the patients' experience but often we have no way of assessing if we are achieving this.

We were lucky to be in at the start of the project work and attended a consultation day in London at the Royal College of Psychiatrists. We worked in groups to look at the standards that were to be used to assess the wards. We felt that the collaborative approach to developing these standards was excellent as the groups were made up of many members of the multidisciplinary team and representatives from service user groups from around the UK. The standards were therefore looked at from all perspectives. On a personal level we found it very beneficial talking to other professionals who encounter the difficulties and the successes that we encounter on a day-to-day basis.

On returning to the wards the reality of the task ahead seemed quite daunting, however, it soon became apparent that the Refocusing work already underway within our Directorate meant that we could build on what we had already started.

We needed to convey the information about the project to the staff in a constructive and accurate way, keeping anxiety levels to a minimum. A series of staff meetings were held and relevant information was sent to each member of staff. Copies of the information were displayed prominently in all areas of the ward.

---

Following the day in London we received a schedule to complete the self-review process which meant completing several different questionnaires. This was one of the most difficult parts of the process, as you were depending on people's goodwill to complete the questionnaires. There were some difficulties during some of the stages of the process - the collaboration of the patients in completing the questionnaires proved a little difficult, and the feedback from the patients stated that the questionnaires were too long, and if they started them many didn't want to finish them.

Mixed response was found in the different areas with getting the carer's questionnaires completed. The second ward learnt from the first's mistakes. The approach was taken to mail a copy of the questionnaire (with a stamped addressed envelope for the Royal College of Psychiatrists) to the next of kin identified in the patient's clinical record.

The staff questionnaires had to be completed online. One ward had problems with internet access at the time so staff completed the questionnaires at home - but the level of enthusiasm was running high, and feedback was very positive.

As a project group we had set guidelines that patients who had been on the ward two-three weeks should be offered the questionnaires if their mental state allowed. This was done with a reasonable response.

The ward manager's questionnaire/review of documents/environmental audit were all completed without any problems.

**"It has been good to see in a constructive way what we do well and what we need to improve"**

Having regular monthly meetings enabled each team to discuss problems and offer support to each other when needed. Both Tresaith and Newid wards felt this was beneficial, especially during the review of the case notes, and this co-operation was invaluable.

Keeping to the deadlines set needed help and assistance from our project lead and from Mark Beavon and the team in London. There were some moments of panic as dates loomed and worry would set in for fear that the work wouldn't be completed: however, the date would come and the work was always finished.

The meetings in London proved to be very productive and useful for sharing information, especially when the other teams would agree that they were experiencing the same or similar difficulties, which could be resolved through discussion. This process was really good, and we felt that we played such a part in the whole process and that our experiences had an impact.

---

Then came the peer review visits (help). This followed months of effort and enthusiasm from the ward →

→ staff. The mornings of each of the visits, prior to the review team arriving, felt tense. However, it was actually relaxed, organised and systematic, with limited disruption to the patients' day on the ward. After all that worry the days went very well with positive feedback from the service users, commenting that they appreciated having the opportunity to discuss what they felt was important and give praise and constructive feedback to the ward team. The staff involved on the days felt it was a very beneficial and worthwhile experience. We are currently working on several areas of evidence that need improvement in order to gain accreditation.

### **So has it been worth it?**

We found the process very beneficial: yes there were hiccups along the way, but on the whole it is a really worthwhile experience. We have been impressed by the staff who have embraced the process in a positive way, and also our managers who were committed to the process and assisted us through, especially when we had a few wobbly moments.

As a team it has been good to see in a constructive way what we do well and what we need to improve. The process has allowed the staff to reflect on their practice, and it has been a beneficial exercise for everyone involved.

As AIMS is an ongoing process, we will continue to monitor and improve our practice. With the work through Refocusing, and the feedback from the AIMS review, there is an opportunity to achieve a working environment that is both therapeutic for the patient and productive for the staff.

### **\* Important Information \***

#### **\* AIMS Subscription Costs from 1st July 2007 \***

From the 1st of July 2007, the cost of subscribing wards to AIMS will rise.

Each ward will, from this date, cost £1,600.00 (+VAT) pa, and there will be no longer be any discount for subscribing additional wards. There will, however, continue to be a 10% discount if wards pay for all four years of their accreditation cycle at once (£5,760.00 +VAT).

In order to take advantage of the current, lower price, wards must submit their Joining Forms by Thursday the 31st of May. Wards that submit their Joining Forms by this date, and those wards that have already subscribed, will not be affected by this price increase for the duration of their first accreditation cycle (first four years of membership).



Star Wards

**Star Wards** is working with mental health trusts to improve acute inpatients' daily

experiences and treatment outcomes, and its director, **Marion Janner** is directly involved with AIMS. There are now 18 trusts comprising about 50 wards piloting Star Wards' ideas, and are finding the experience uplifting for staff as well as patients. It's not too late to join this dynamic network - for more information email [marion@brightplace.org.uk](mailto:marion@brightplace.org.uk) or see [www.starwards.org.uk](http://www.starwards.org.uk)

### **AIMS Standards for Acute Inpatient Wards - Second Edition**

The standards against which we accredit member wards are updated annually, and we are already starting to think about the second edition. We would appreciate any comments or suggestions you have for improving or amending the standards, particularly if you feel that we have omitted something you think should be there. Any feedback we receive will be collated and taken to the new AIMS Standards Reference Group, which meets for the first time in July - your deadline is therefore the 1st of June. Please get in touch via the addresses on the front page of this newsletter.

### ***Have your say...***

All members of AIMS - including anyone who works on a member ward - is entitled to join the AIMS Email Discussion Group.

This is your forum for sharing ideas and experiences, and is also where you can receive updates on the project. To sign up, please send an email with the word 'Join' in the subject line to:

**[AIMS-CHAT@cru.rcpsych.ac.uk](mailto:AIMS-CHAT@cru.rcpsych.ac.uk)**

