

# Quality Network for Mental Health Rehabilitation Services

## Associate membership Guide



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## Introduction

Welcome to the Quality Network for Inpatient Mental Health Rehabilitation Services (Rehab).

This pack is aimed at the person or persons within your service who will take the lead in the ward's accreditation process. It should help you to understand what is expected of you and what will happen throughout the self-review process, accreditation visit and other expectations of membership. If you have any questions, please do get in touch with the project team (details below).

## Rehab: COVID-19

Due to COVID-19 restrictions, Rehab had been unable to conduct peer review visits to members in person. Therefore, the Rehab Project Team created a process to conduct remote peer review visits to members so they can continue their accreditation journey. Whilst the principles of peer review remained the same, certain aspects of the review have been adapted to ensure that we can continue to provide a robust and comprehensive accreditation review to members.

This document has been adapted for the person(s) within your service who will take the lead in the ward's remote accreditation process. Its purpose is to inform you what to expect throughout the self-review process and the adapted accreditation visit as well as what is expected of you in your role as a project lead.

As expected, the restrictions of COVID-19 have presented various challenges for all involved with the CCQI. With the Project Team working from home to support Rehab members, adaptations and innovations have been made to ensure Rehab members benefit from their membership as far as possible.

An increase in the reliance on video technology to communicate as a College, and with our member services, has resulted in our quarterly Accreditation Committee meetings being held remotely. Therefore, whilst the evidence submission process remains unchanged for services going through the accreditation process, the impact of COVID-19 on services means there is now College guidance in place to provide support on a case-by-case basis. It is important to contact the Project Team if you feel you are affected in this way.

## Project Team

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## Background

The Quality Network for Inpatient Mental Health Rehabilitation Services (Rehab) works with rehabilitation wards and units to assess and improve the quality of care they provide. Rehab engages staff, patients and carers in a comprehensive process of self and peer review to enable services to identify areas of good practice and areas for development. Member services are encouraged to use peer review visits, and other member events, to share knowledge and ideas with others, thereby creating a mutually supportive environment which encourages learning, and leads to positive change. Rehab also offers accreditation for those members who can demonstrate a high level of compliance with the standards.

The Rehab 4th edition standards are drawn from key documents and expert consensus and work completed within the College Centre for Quality Improvement (CCQI). The standards have been subject to extensive consultation with multidisciplinary professionals involved in the provision of inpatient mental health services, and with experts by experience and carers who have used services in the past.

## Role of the Project Lead

Welcome to Rehab: a Quality Network for Mental Health Rehabilitation Services.

This pack is aimed at the person or persons within your service who will take the lead in the ward's self-review process. It should help you to understand what is expected of you and what will happen throughout the self-review process and other expectations of membership. If you have any questions please do get in touch with the project team (details below).

As project lead there are a number of tasks for you to complete throughout your involvement with the project.

- Disseminating information from the Rehab network to your service
- It is important that everyone who works in the service, current service users and carers are aware of the fact that you are going through the self-review process, what this means and what is expected of them.
- As lead you will receive updates and information about the wider network (including about events) please share these with the rest of your team, as appropriate.
- Maintaining contact with the network team
- The project team will contact you throughout your membership please respond promptly.
- If your details change or you are no longer the best person to act as the project lead please let the network team know.
- If the ward is moving or changing please contact the network team with details.

## Role of the Project Lead

- Ensuring that your self-review is completed on time
- Nominating reviewers and ensuring that they attend reviews for other services
- Services are required to arrange and fund travel and expenses for reviewers to attend visits as part of their membership. Being a peer reviewer contributes to the quality improvement of your ward through shared learning, it also acts as continuous professional development and CPD certificates are available.
- Professional reviewers are categorised as Nursing, Medical or MDT (all other qualified staff) you should have reviewers from at least two of these categories.
- Reviewers are required to attend training before they can go on a visit. Please contact the project team to find out when the next training dates are.
- If a reviewer is no longer able to attend a review that they have signed up for it is your responsibility, as project lead, to find a replacement. If the review is unable to go ahead because a reviewer has cancelled at short notice your service is liable for any associated costs.
- Identify individuals who may want to apply to act as a Service User or Carer Representative with the network.
- Peer Support Workers may apply if they have personal experience of a rehab ward.
- We are not able to accept applications from service users who are currently on an inpatient ward. We would encourage wards to support suitable individuals to apply when they are discharged.

## **Rehab Membership**

In addition to the peer review process which you have signed up to there are also a number of benefits to being a member of AIMS Rehab.

### **Being a Peer or Lead Reviewer**

Acting as a Peer or Lead Reviewer is a great opportunity to learn from other services, as part of the quality improvement process. See the next page for more information.

### **Annual Forum**

The Rehab Annual Forum is held every year. It is an opportunity for services across the country to come together to discuss findings from across the network and share service development initiatives. This is also an opportunity for your service to present on a topic of your choosing. If you would be interested in presenting at the Annual Forum, please contact the network team. During COVID-19

### **Annual Report**

An Annual Report is published every year, with its findings and recommendations reported at the Annual Forum. The report presents national findings identifying trends and enabling benchmarking with other services.

### **Special Interest Days**

Special Interest Days are run by the network and dedicated to a topic identified by the members. The day is then led by members to ensure that it is truly focused to the topics that are most important for those working within inpatient mental health rehabilitation services. If you would like to suggest a topic for a special interest day or would like to know when the next one is being held, please contact the network team.

## **Rehab Membership**

### **Email Discussion Group**

The email discussion group provides access to experienced and knowledgeable professionals from a range of disciplines who work in or alongside inpatient mental health rehabilitation health services. The Project Lead(s) will automatically be added to the distribution list but any member of staff from the service is able to join by emailing [rehabdiscussion@rcpsych.ac.uk](mailto:rehabdiscussion@rcpsych.ac.uk) with their details. Please ensure that you add this email address to your 'safe senders' list so that you are able to access the emails.

### **Shared Learning Forums and Webinars**

Rehab host and produce webinars for professionals and service user and carer representatives to share good practice with the membership.



## Peer Reviewers

### Professional reviewers;

Staff who work in your ward are able to act as a peer reviewer and attend accreditation/peer review visits to other wards. It is a condition of your membership that you provide at least two professional reviewers to attend visits/remote reviews every year. As well as being a vital part of the network and ensuring other services are able to have their visits, being a reviewer is a great opportunity for the reviewer and their service. Visiting other services is an opportunity to understand how they work and to pick up ideas and innovations that they are then able to bring back to their own team. This feeds back into your ward's process of quality improvement.

As you are going through the peer review process, you may find it beneficial for your reviewers to attend other peer review visits. However, you may also want them to attend accreditation visits in order to understand more about that process. If you would like your reviewers to attend accreditation visits they will need to attend a training session.

Staff are also able to use peer review visits as part of their CPD and we are able to provide a CPD certificate for every visit that they complete. Once trained reviewers have completed three accreditation visits, they are able to apply to become Lead Reviewers.

### Service Users and Carers;

The voices of service users and carers are vital when assessing any service, so all of our visits have a service user or carer on them. Therefore, all visits will have a service user and/or carer representative on them.

## Self-Review

### Aims, Purpose and Outcomes

Completing the self-review workbook provides a designated space for teams to reflect and acts as a useful team-building opportunity. The self-review forms the basis of the peer-review visit the completed workbook will be sent to the visiting peer reviewers in advance of your peer review visit so that they can familiarise themselves with the key issues raised. The QuIRC and regulators report will provide additional context to the review team and may help them to identify areas of achievement and for improvement.

### Step-by-Step Guide to the Self-Review

Please ensure that all staff, service users and carers are aware of your membership and self-review.

#### Contextual Information

The first section of the self-review is to provide contextual, service and staffing information about the ward. This will allow us to benchmark this data against other services, within the annual report, and against your own data in future years. It will also provide context for others who read your report.

#### Update on Previous Action Points

The update on previous action points is particularly useful for wards who have completed a previous self-review. You should review the action plan in your previous report and comment on progress. This will help you to monitor improvements and highlight any ongoing barriers.

If you have not completed a self-review before you can complete this section based on actions that you have completed over the previous 12 months. You only need to do this if you would find it useful as part of your self-review, it isn't mandatory. You will have the opportunity to plan actions based on the finding of your self-review later.

## Self-Review

### Standards Self-Assessment

#### Gathering viewpoints for your self-assessment

It's important that your self-assessment reflects the views of senior staff, frontline staff, patients, carers and other stakeholders. This can be achieved through focus groups generally based on people's views on the service. You could also arrange for a smaller group, representative of these groups, to review the standards in more detail.

You can also use other reports as sources of information, such as your regulators report and the QuIRC. The Quality Indicator for Rehabilitative Care (QuIRC) is an internationally recognised toolkit to enable you to measure best practice within your service and benchmark yourself against similar services. To complete the QuIRC visit <http://www.quirc.eu> where you will need to register. It should be completed by a manager or senior member of the team and you will then receive a report.

#### Scoring Standards

Once you have a range of views on how the service is performing you need to provide a score and commentary for each standard. There are just under 250 standards so allow plenty of time to complete this.

#### The standards are split into three types:

**Type 1:** failure to meet these standards would result in a significant threat to patient safety, rights or dignity and/or would breach the law. These standards also include the fundamentals of care, including the provision of evidence based care and treatment

**Type 2:** standards that an accredited ward would be expected to meet.

**Type 3:** standards that an excellent ward should meet or standards that are not the direct responsibility of the ward.

There are four possible scores for each standard:

## Self-Review

There are four possible scores for each standard:

**Met:** You are confident that you are meeting the requirements of the standard and would be able to produce evidence to demonstrate it.

e.g. 11.1 [Type 2] Discharge planning is initiated at the first multi-disciplinary team review and a provisional discharge date is set within 8 weeks of admission. There is a prompt in the MDT review template to discuss discharge planning, this means that staff are reminded to plan for discharge from the first meeting and set a discharge date 4-6 weeks after admission. This is documented in patient's health records, which is how you would evidence it.

**Partly Met:** You are meeting and able to evidence most of the requirements within the standard or you are meeting all the requirements of the standard but wouldn't be able to evidence it.

e.g. 9.1.2 [Type 1] The team gives targeted lifestyle advice and provides health promotion activities for patients. This includes:

- Smoking cessation advice;
- Healthy eating advice;
- Physical exercise advice and opportunities to exercise.

There is a dedicated healthy lifestyles champion on the ward, who works with patients individually on diet and exercise including supporting them to access opportunities to exercise. This is documented in the health records. Patients also feedback that the champion helped to motivate them to eat better and exercise more. However no members of staff are trained to give smoking cessation advice.

**Not met:** You are not meeting the majority of the requirements within the standard.

e.g. 15.6 [Type 1] The team follows a protocol for responding to carers when the patient does not consent to their involvement. The ward does not have a specific protocol for how to respond to carers when the patient has not consented to their involvement. Staff reported being unsure how to respond and carers gave feedback that they received different information from different members of staff.

**Not Applicable:** There is a specific reason why standard is not relevant to your service.

e.g. 19.40 [Type 2] Where smoking is permitted, there is a safe allocated area for this purpose. The ward is designated as being non-smoking.

## Self-Review

### Providing Commentary

You should also provide commentary against each of the standards to explain why you have assigned that score. This should include the different parties that gave feedback on the standard and if there were any differences of opinion. If you have scored the standard as 'Partly Met' or 'Not Met', you should also include any thoughts that you or your stakeholders have had about how to make improvements.

### Action Plan

This is the space for you plan how to make the improvements identified within your self-assessment. You should include all standards scored as 'Partly Met' or 'Not Met' but you may have also thought about improvements to make on standards that you've scored as 'Met'. Please see the Action Planning Guide on the following page for more information on how to complete your action plan.

### Finishing your Self-Assessment

If at any time you feel that you will not be able to complete the self-review before the deadline please contact the network team as soon as possible.

When you have completed the review please email it to your project team contact.

## Action Planning Guide

On the following page you will find an action planning form for you to make plans in relation to any action points that you have identified in your self-review. You will then be asked to update on your progress against this action plan in your next self-review as part of any membership.

Identify area for improvement	Who needs to be involved and how?	Sources of support/information to develop plan	Human, financial and time resources you need	Who will lead on this?	Deadline
Identify and record the area for improvement	Think about all those who may be affected by the action taken and how you aim to communicate with those involved	This can include details of any existing initiatives that you could tap into		Identify someone who will monitor and implement this action	When, realistically, could this be completed by?
Before naming the area for improvement, you may wish to consult' this: this report, the staff team, service users and carers, as well as, other relevant agencies if appropriate.	Who needs to be actively involved in this and what do they need to do? Who do you simply need to be keep informed? How will you maintain communication? At what time points do you need to communicate?		How many hours a week will be required from staff in order to implement the action plan? What funds will be required?	Record the name and role of the person responsible.	

## **After the Self-Review**

### **Report**

Within 30 days of submitting the Self-Review you will receive your report, you then have 30 days in which to notify us of any errors.

### **Developmental Membership**

After you have completed the Self-Review and received your report you will feel more ready to proceed with a more in depth membership option. We suggest that after a maximum of two years you move on to Developmental Membership.

#### **What is the benefit?**

- This membership enables services to complete quality improvement work within the structure of the AIMS Rehab Standards. The process enables services to focus on areas that will benefit them the most.
- There is no expectation that the service meets a required number of standards.
- Services can use this process as preparation for the accreditation process or can continue as developmental members for as long as they wish.

#### **What is involved?**

- During the self-review services will assess themselves against the standards and identify specific areas of focus for the review day.
  - A peer review team, formed of rehab professionals and a service user or carer representative, will conduct a one day visit. The team will identify areas of achievement and for improvement, as well as helping the service plan how to implement identified improvements.
- The service receives a peer review report of findings from the day and an action planning template.

## Associate Project Lead Checklist

Set the timescales for your Self-Review

Complete QuIRC ([www.quirc.eu](http://www.quirc.eu))

Inform all staff, senior management, service users and carers about the network and self-review

Host group discussions to understand what staff, managers, service users, carers and other stakeholders feel about the service

Complete the Self-Review document and return to the Project Team

Keep a copy of your Action Plan, return to it regularly to ensure actions are progressing

Send at least two members of your team to Reviewer Training

Check that your trained reviewers attend at least one visit each every year. Make sure they feedback what they learnt from the day.

Identify any individuals who might want to apply for the Service User or Carer Representative role in Rehab

Attend the Annual Forum and Special Interest Days with some of your team. Share your learning with the whole ward.