

[A Newham] CMHT 'Team Evaluation'

Distribution of Ratings (September 2006)

[Summary of 11 responses]

Ethical Practice	1. Service users determine the priorities in the care plan.	DISAGREE 1 [2] 2 [6] 3 [2] 4 [1] 5	AGREE
	2. We actively promote the use of ordinary community resources.	DISAGREE 1 [1] 2 [1] 3 [5] 4 [3] 5 [1]	AGREE
Care process	3. Time for creative approaches to engagement is a priority.	DISAGREE 1 [3] 2 [6] 3 [1] 4 5 [1]	AGREE
	4. Our assessment of needs includes the identification of service user strengths.	DISAGREE 1 [2] 2 [3] 3 [1] 4 [4] 5 [1]	AGREE
	5. We identify and manage the broad range of risks reasonably and effectively.	DISAGREE 1 2 3 [7] 4 [3] 5 [2]	AGREE
	6. Our interventions draw on a broad range of bio-psycho-social and practical approaches.	DISAGREE 1 2 [3] 3 [6] 4 [1] 5 [1]	AGREE
	7. We implement CPA as an effective service user centred approach.	DISAGREE 1 [2] 2 [5] 3 [3] 4 [1] 5	AGREE
Team working	8. I am clear about the priority functions of the team.	DISAGREE 1 2 [1] 3 [6] 4 [3] 5 [1]	AGREE
	9. The referral and allocation processes function well.	DISAGREE 1 2 [2] 3 [5] 4 [3] 5 [1]	AGREE
	10. We have good systems of support and supervision.	DISAGREE 1 2 [1] 3 [7] 4 [2] 5 [1]	AGREE
	11. The team decision making process works well.	DISAGREE 1 [1] 2 [1] 3 [7] 4 [1] 5 [1]	AGREE
	12. We have efficient systems of administration and documentation.	DISAGREE 1 [1] 2 [3] 3 [3] 4 [2] 5 [2]	AGREE
	13. We link effectively with other parts of the mental health system (including primary care).	DISAGREE 1 [2] 2 3 [5] 4 [4] 5	AGREE

Knowledge in Practice	14. I utilise the diversity of knowledge and experience within the team.	DISAGREE 1 2 3 [5] 4 [5] 5 [1] AGREE
	15. My current knowledge adequately equips me to do my job	DISAGREE 1 2 3 [4] 4 [6] 5 [1] AGREE

Ranking of Items by Mean Scores

	Item Description	Category	Mean Score
1.	My knowledge equips me to do my job	Knowledge in Practice	3.73
2.	Utilising knowledge & experience of the team	Knowledge in Practice	3.64
3.	Identify and manage risk effectively	Care Process	3.55
4.	Clear about the priority functions of the team	Team-working	3.36
5.	Referral and allocation processes work well	Team-working	3.27
5.	Good systems of support & supervision	Team-working	3.27
7.	Actively promote use of ordinary community resources	Ethical Practice	3.18
8.	Efficient systems of administration & documentation	Team-working	3.09
9.	Draw on bio-psycho-social & practical approaches	Care Process	3.00
9.	Team decision-making works well	Team-working	3.00
9.	Link effectively with other parts of the mental health system	Team-working	3.00
12.	Assessment includes identifying strengths	Care Process	2.91
13.	Implement CPA as a service user centred approach	Care Process	2.27
14.	Service users determine priorities in the care plan	Ethical Practice	2.18
15.	Time for creative engagement is a priority	Care Process	2.09

Headline Findings

- The *knowledge base* of staff is less of a priority for development
- *Client-centred* practice items (strengths, CPA, care plan priorities, and engagement) occupy the lowest 4 rankings

[A NEWHAM] COMMUNITY MENTAL HEALTH TEAM

PRACTICE DEVELOPMENT PROPOSAL [in response to evaluations]

Aim

To provide a 5-day programme of practice development support.

Programme

Team Development away-day to engage with the team and explore the existing strengths & needs for practice development support.

4 days of practice development & training input (in a combination of whole &/or half-day sessions depending on needs arising)... potential areas for development include:

- a) Creating a flexible, creative and service user-centred approach to CPA.
 - b) Developing a service user centred 'strengths approach'.
 - c) Good practice in risk management (inc. the concept of 'positive risk-taking').
 - d) Examining team-working systems (e.g. duty).
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