



**PERCEIVE
Annual Report 2010**

PERCEIVE (Patient Involvement in Improving Patient Care)

Brief Summary

PERCEIVE is a research programme which examines the therapeutic environment on inpatient psychiatric wards. This programme emphasises service user views and also takes feedback from staff. PERCEIVE consists of 4 work packages. WP1 consists of developing two questionnaires assessing service user and nurse perceptions of acute wards. WP2 have created an assessment of economic costs of activities taking place in acute wards. Providing training to nurses on how to run therapeutic activities in wards is the focus of WP3, which is done in a randomised controlled framework. Finally WP4, compares ward admission systems; a triage system versus a traditional admission system.



I. Acronyms

PERCEIVE - Patient Involvement, Improving Patient Care

WP1 - LIAISE - Lasting Improvements for acute inpatient settings

VOTE - Views on Therapeutic Environment (nurses)

VOICE - Views on Inpatient Care (service users)

WP2 - CITRINE - Measuring Cost-effectiveness in acute care

WP3 - DOORWAYS - Delivering Opportunities for Recovery

WP4 - BETTER PATHWAYS - Bringing emergency treatment to early resolution

II. Staffing/Management of the Programme

Chief Investigator: Professor Til Wykes

Business Manager: David Hunt

PA to Til Wykes: Geraldine Davis

Lead on LIAISE: Dr Diana Rose

Researchers on LIAISE: Caroline Laker

Jo Evans

Lead on CITRINE: Dr Paul McCrone

Researchers on CITRINE: Ramon Sabes Figuera

Jessica Sharac (currently a vacant post)

Lead on DOORWAYS/BETTER PATHWAYS: Dr Emese Csipke

Clinical Psychologist on DOORWAYS: Dr Steven Livingstone

Researchers on DOORWAYS/BETTER PATHWAYS: Jacqueline Lee Tilly

Alistair Bailie

Bina Kerai

Sarah Byrne

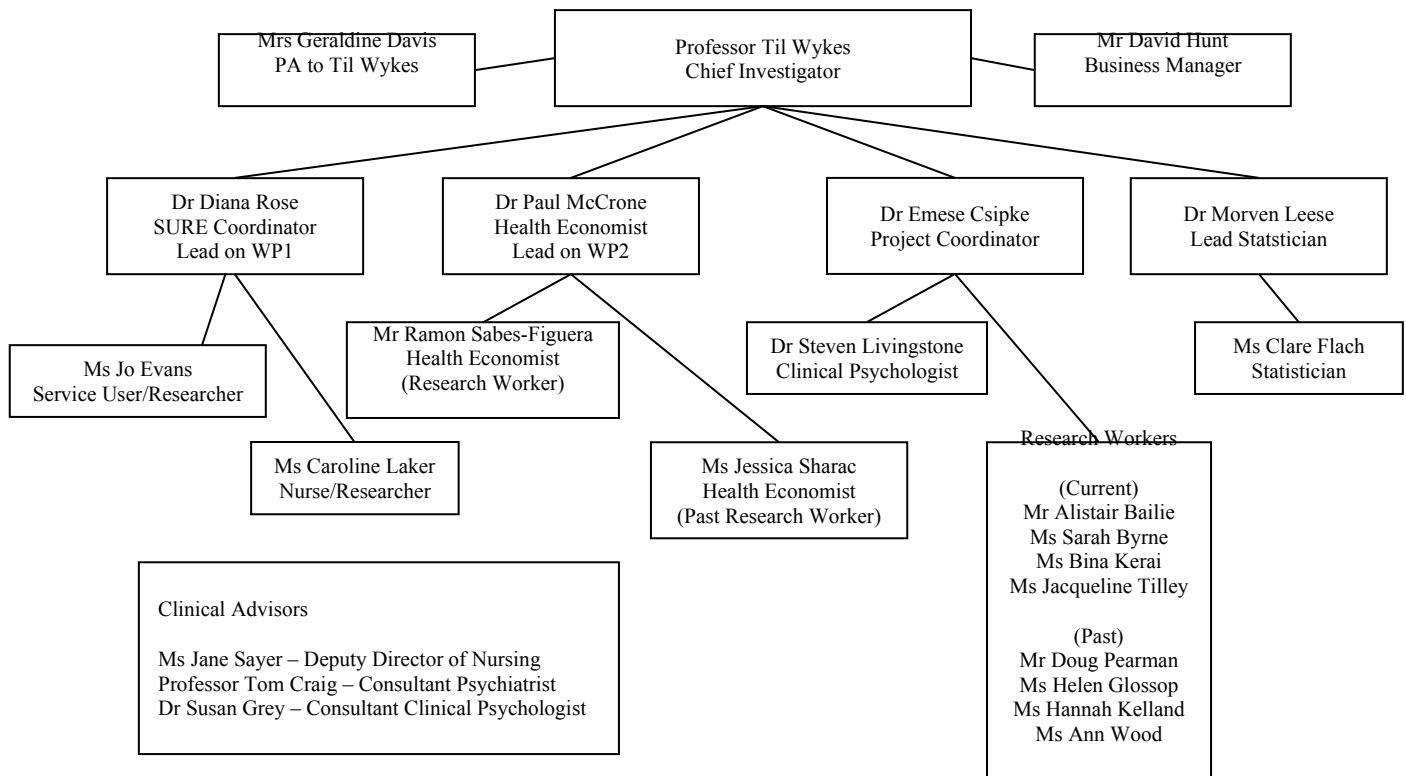
Data Manager: Clare Flach

Statistician: Dr Morven Leese

Clinical Psychologist: Dr Sue Grey

Consultant Psychiatrist: Professor Tom Craig

Grant Holders: Til Wykes, Paul Calaminus, Tom Craig, Patrick Gillespie, Frank Holloway, Morven Leese, Martin Knapp, Hillary McCallion, Paul McCrone, Clare Reeder, Diana Rose, Graham Thornicroft



Organisation of Responsibilities

PERCEIVE has a **monthly management meeting** that all involved in the everyday running of PERCEIVE attend (most recent minutes attached). It also has a **quarterly meeting** which all PERCEIVE personnel attend and to which members of SLAM involved in PERCEIVE are invited.

DOORWAYS has a **management meeting** every two months, attended by members of the PERCEIVE team involved in DOORWAYS as well as Croydon and Southwarks' SLAM staff involved.

LIAISE

Diana Rose has weekly management meetings with Caroline Laker and Jo Evans

CITRINE

Paul McCrone has weekly management meetings with Ramon Sabes-Figuera/Jessica Sharac

DOORWAYS

Emese Csipke has weekly management meeting with the researchers

Emese Csipke has weekly management meetings with Steven Livingstone

Emese Csipke and Steven Livingstone have meetings with the Researchers twice per recruitment cycle to discuss the challenges of working on wards

III. ETHICS

Ethical approval for PERCEIVE was granted by the Bromley Ethics Committee on 27 November 2007 (ref. 07/HO809/49). On June 23, 2009, following a minor amendment request, we received permission to recruit service users more than once in order to harmonise eligibility criteria with that of staff, as well as give us the ability to track service users' changes in perceptions over time potentially.

On 22 February 2010 (ref. 09/HO804/107) permission was granted by the Guy's Ethics Committee to include add on studies in the DOORWAYS project to evaluate the therapeutic activities taking place (please see further information in Add On Study section)

IV. STAKEHOLDER ENGAGEMENT

LIAISE

- 37 service users participated in the focus groups convened to develop the measure.
- 48 nursing staff members from SLAM participated in focus group convened to develop the measure.

CITRINE

- 7 SLAM staff members were interviewed about their opinions of the draft measure.

DOORWAYS

- Croydon and Southwark staff members (nursing advisors, ward managers, ward staff, occupational therapists, and pharmacists) were involved in helping with the development and choice of therapeutic activities on offer. At each round of randomisation, the randomised wards decide collectively which optional interventions best suits their wards.
- Clinical Psychologists, Nursing Advisors and Head Nurses have been involved in supporting/providing training and providing supervision to the nurses involved in the therapeutic activities.
- A service user trainer has been employed to co-facilitate a 'working well together (communication skills) training exercise for ward staff.
- Researchers always do a ward shift on each ward (total of 24) before the start of each data collection to get to know the ward and the staff. These ward shifts are done on the researchers' respective 'adopted' ward.
- Wards were asked to contribute to the acronyms and logos. The winning DOORWAYS logo idea came from a ward in Croydon, which informed the resulting other various logos.

BETTER PATHWAYS

- Clinical directors and consultant psychiatrists have been involved in formulating some of the research questions being asked. In particular, with the help of psychiatrists and administrators we have gotten anonymous data regarding length of stay for all service users that have been admitted to Lewisham and Lambeth.
- Researchers do a ward shift on each ward (total of 25) before the start of each data collection to get to know the ward and the staff. These ward shifts are done on the researchers' respective 'adopted' ward.

V. DISSEMINATION OF FINDINGS

Website

A website was created for PERCEIVE with the help of the MHRN. It contains summaries of the project and individual work packages, contact information, timelines and organisation charts. It also has links to newsletters or publications related to PERCEIVE.

<http://www.perceive.iop.kcl.ac.uk>

Newsletters

Newsletters were sent at the end of the focus groups and once test retest reliability data was gathered for VOTE and VOICE in order to thank and inform participants. Newsletters are also sent prior to each data collection in DOORWAYS and BETTER PATHWAYS to thank, update and remind the staff and service users of their participation in the projects. Please see appendix for copies.

Conferences

Publications

LIAISE

Laker, C; *Rose, D; Flach, C; Csipke, E; Kelland, H; Wykes, T; VOTE: Views of the Therapeutic Environment: A measure of staff perceptions of acute in-patient care. To be submitted to the British Journal of Psychiatry

*Joint first author

Evans, J; Rose, D; Flach, C; Csipke, E; Glossop, H.; Wykes, T; VOICE: Developing a New Measure of Service User Perceptions of Inpatient Care, using a Participatory Methodology. To be submitted to the British Journal of Psychiatry

CITRINE

Sharac, J., McCrone, P., Sabes-Figuera, R., Csipke, E., Wood, A. & Wykes, T. (2010). Nurse and patient activities and interaction on psychiatric inpatient wards: A literature review. *International Journal of Nursing Studies*.

<http://dx.doi.org/10.1016/j.ijnurstu.2010.03.012>

Sabes-Figuera, R., McCrone, P., Sharac, J., Csipke, E., & Wykes, T. (draft)
Developing an instrument for collecting activity data on psychiatric inpatient wards: the Client Services Receipt Inventory-Inpatient (CITRINE) - to be submitted to Health Services Research.

DOORWAYS and BETTER PATHWAYS

50 years of inpatient care: A comparison with and description of baseline PERCEIVE data.

Planned papers:

Theory based qualitative paper jointly for VOTE and VOICE.

Do nursing staff and service users agree about what constitutes a positive perception/experience of acute wards?

Does admission system style (triage versus traditional) influence length of stay and readmission rates?

Do perceptions of wards change as therapeutic activities increase?

The practical considerations of how to enable nurses to run therapeutic activities on wards and then maintain them.

Tentative papers:

Cost and predictors of therapeutic staff contacts and activities on mental health wards. Results from a large survey using the CITRINE questionnaire.

Cost-effectiveness of increasing therapeutic activities on mental health inpatient wards

Impact of therapeutic activities on length of stay and costs on mental health inpatient wards. A model.

VI. Add on studies

Add on studies must be approved by the Publications Committee. A proposal must be submitted.

Currently approved Add On studies:

- i. An Evaluation of a Self-Esteem and Coping with Stigma Group for Acute Inpatients
- ii. An Investigation of Attrition in Inpatient Group Therapeutic Activities
- iii. An Evaluation of a Problem Solving Group for Acute Adult Inpatients
- iv: An Evaluation of an Emotional Coping Skills Group
- v. An Evaluation of Emotion Coping Skills Individual Intervention

VII: Recruitment Rates

DOORWAYS					
		# of service user participants		# of staff participants	
T0	Southwark	76	(54%)	70	(57%)
	Croydon	40	(47%)	33	(64%)
T1	Southwark	61	(60)	90	(79%)
	Croydon	50	(59%)	50	(85%)
Work Package	Southwark	137	(60%)	160	(77%)
	Croydon	90	(50%)	83	(75%)

Non-participating Service Users - Doorways

		Ineligible as < 7 days on ward or already participated		Ineligible due to language/cognitive difficulties		Eligible but unable to contact		Eligible but unwell		Eligible but unwilling	
T0	Southwar k	21	(26%)	9	(11%)	20	(25%)	20	(25%)	28	(35%)
	Croydon	0	(0%)	1	(2%)	31	(55%)	6	(11%)	21	(37%)
T1	Southwar k	33	(39%)	12	(14%)	5	(6%)	11	(13%)	24	(28 %)
	Croydon	25	(38%)	6	(9%)	16	(24%)	11	(17%)	8	(12%)
	Southwar k	54	(33%)	21	(13%)	25	(15%)	31	(19%)	52	(31%)
	Croydon	25	(20%)	7	(6%)	47	(38%)	17	(14%)	29	(24%)

BETTER PATHWAYS					
		# of service user participants		# of staff participants	
T0	Lambeth	58	(47%)	66	(55%)
	Lewisham	52	(52%)	53	(44%)
T1	Lambeth	81	(65%)	72	(61%)
	Lewisham	62	(63%)	64	(83%)
T2	Lambeth	138	(76%)	47	(52%)
	Lewisham	72	(67%)	71	(88%)
	Lambeth	277	(61%)	185	(47%)
	Lewisham	186	(60%)	188	(67%)

Non-participating Service Users - Better Pathways

		Ineligible as < 7 days on ward or already participated		Ineligible due to language/cognitiv e difficulties		Eligible but unable to contact		Eligible but unwell		Eligible but unwilling	
T0	Lambeth	16	(14%)	5	(4%)	62	(55%)	9	(8%)	21	(19%)
	Lewisham	1	(2%)	4	(6%)	29	(46%)	18	(29%)	11	(18%)
T1	Lambeth	66	(58%)	4	(3%)	14	(12%)	7	(6%)	22	(20%)
	Lewisham	33	(46%)	3	(4%)	8	(11%)	14	(19%)	14	(19%)
T2	Lambeth	36	(40%)	9	(10%)	15	(17%)	6	(7%)	23	(26%)
	Lewisham	57	(55%)	15	(15%)	4	(4%)	12	(12%)	15	(15%)
Work Package	Lambeth	118	(38%)	18	(5%)	91	(29%)	22	(7%)	66	(21%)
	Lewisham	91	(38%)	22	(9%)	41	(17%)	44	(19%)	40	(17%)