or alcohol abuse diagnosis

institution?

(eg Alzheimer's or dementia)?

(4) people with a neurodegenerative diagnosis

 About what per cent of the residents are deprived or restricted of legal capacity (under guardianship)?

 Who are the guardians? (eg family members, professional staff, the director of the institution)
 What is the average length of stay in this unit/

# Section 9 Prompt questions for the monitoring visit (30 Parts)

### Part 1 Monitoring description Name, address, telephone number of institution Name of director email of the director Type of institution (ie hospital, social care home, psychiatric institution) Date(s) of monitoring visit Monitoring team members Part 2 Institution details 2.1 Location (Source: observation) • Describe the location of the institution. Is it located in a rural or urban setting? • How accessible is it by public transport? • How far is it from the nearest town? Are there gates, or can you/visitors/ residents walk in and out (refer here to legally voluntary residents?) • Is there a guard/visitor check-in and check out system? 2.2 Institution (Source: director and documentation) • How is the institution financed? (eg. what per cent by a ministry, local government, residents, private individuals, local community, church, etc) and what is the approximate total budget? Is the budget and expenditure publicly available? • Have the human rights of the people in this institution been monitored (give details)? 2.3 Residents (Sources: residents, staff, observation) • How many beds/places are there in the institution? How many people are sleeping in this unit/ institution tonight? Approximate per cent of men and of women? Approximate per cent of those aged (a) under 18, (b) 18-65, (c) over 65? • Most people in this unit/institution are in which of the following categories: (1) people with a mental health diagnosis (2) people with an intellectual disability diagnosis (3) people with a substance

- In the last 12 months, how many people left (were discharged):
  - (1) into the community
  - (2) into other institutions
- How many people died?
- What were the ages of those who died in the last 12 months?
- What is the procedure for investigating a death?

#### 2.4 Staff (Sources: director and documentation)

- What is the total number of staff who work in this unit/institution? (full-time equivalent staff numbers)
- How many of the staff are:

Psychiatrists

Non-psychiatric doctors

Qualified nursing and allied staff

Non-qualified nurses

**Psychologists** 

#### 2.5 Staff training

(Sources: staff and documentation, policies)

 Are staff members required to participate in continuing professional development? (give details)

#### 2.6 Complaints mechanisms

(Sources: director, residents, observation,

documentation, domplaints register, annual report)

- How do residents make complaints about any aspect of the institution?
- Do residents know about the process?
- Are the residents provided with the necessary means to complain? (eg pens, paper, secure boxes)?
- Are records kept about complaints?
- Is there an annual report published and reviewed about complaints?
- What are the steps taken to deal with unresolved complaints and is there any system of advocacy?

#### **Part 3** Living Standards and Conditions

#### 3.1 Material and physical conditions

(Sources: director, staff, residents, observation in different rooms (bedrooms, dining rooms, therapy rooms, WC, bathrooms)

- Is the provision of electricity adequate?
- Is the heating adequate?
- Are there damaged features, such as broken windows, damaged walls?
- Are the parts of the institution to which residents have access adequately clean?

#### 3.2 Facilities

(Sources: staff, residents, observation)

- Are the facilities generally overcrowded? (give details)
- Is there adequate access to outdoor areas?
- Are all facilities accessible for people with physical and sensory disabilities?
- Is there an adequate provision of separate areas for men and women?

#### 3.3 Dining and food

(Sources: residents, staff, observation (of kitchen, of dining areas during meal)

- Describe the dining room: is there adequate space for people to eat?
- Is the food nutritious?
- Is the food generally attractive?
- Is there any evidence of malnutrition among residents? (give details)
- To what extent do residents have access to additional snacks and meals?

#### 3.4 Water (Sources: staff, observation, residents)

• Is clean drinking water freely available all day to all residents?

#### 3.5 Clothing

(Sources: staff, observation, residents)

- Can residents wear clothing of their choice? (is the clothing their own? Do they have to wear uniforms/pyjamas?)
- How are clothes cleaned and how often?

#### 3.6 Bedrooms

(Sources: residents, documentation, observation. Visit different rooms in different units and collect the information below on a number of different arrangements)

- How many beds in each bedroom?
- Are beds shared? (Can residents choose whom they share a room with or are they forced to share space with others? give details)
- What is the state and comfort of the beds? (if residents give permission, lie on the beds)
- Are there enough sheets and blankets of sufficient quality and cleanliness?
- Do residents have personal objects and pictures around their bed?
- Is there secure space for each resident to keep personal items? (for example in lockers or bedside cabinets)

#### 3.7 Lighting

(Sources: observation and residents)

 Are places to which people have access supplied with adequate light?

#### 3.8 Fresh air

(Sources: observation and residents)

Is the air fresh (give details)?

#### 3.9 Hygiene

(Sources: staff, residents, observation)

- Are washing facilities freely available?
- Do staff use the same toilets as residents?
- Privacy are there appropriately separate facilities for men and women? Are toilets and showers etc separated?
- Do they have doors or are they communal? Are they clean?
- Is toilet paper available in sufficient amounts?
- To what extent are residents watched by staff while using bathrooms or toilets?
- Are necessary hygiene supplies for female residents, such as sanitary towels, available?

#### Part 4 Involuntary commitment and review procedures

#### NB This Part may not be relevant to all institutions

(Sources: residents, law, staff, documentation - court or hospital records)

- Are the appropriate legal procedures for involuntary detention fully implemented?
- Are legally detained residents routinely and fully informed about their rights, including the right to appeal against detention?
- What access is there to assistance and legal representation in relation to involuntary detention?

# Part 5 Living independently and being included in the community after discharge

(Sources: staff, residents, documentation - individual discharge plans)

- How does support and recovery continue after this period of institutional treatment?
- Who participates in providing support for recovery?
- Who would you like to involve in the support?
- What alternatives to this institution exist in the local area?
- What arrangements does the institution make to discharge the person into community settings?
- Who is responsible for this?

# Part 6 Participation in cultural life, recreation, leisure and sport

(Sources: staff, residents, observation, documentation - eg weekly schedule, posters etc.)

- How much access is there to newspapers, magazines, books, radio, television, audio books, computers?
- What sorts of cultural, recreational, leisure and sports activities are available to residents inside this unit/institution?
- What sorts of cultural, recreational, leisure and sports activities are available to residents outside this unit/institution?
- Are any residents not allowed to participate in any of the activities? Why not?
- How accessible are these activities for residents?

#### Part 7 Participation in political and public life

(Sources: staff and residents)

- How do people exercise their right to vote?
- Do people receive assistance in exercising their right to vote? (give details)
- Is anyone excluded from voting? (give details)
- Is there any evidence of interference with the process of voting?

### Part 8 Education, training, work and employment

(Sources: staff and residents)

- What types of education programmes are available in the institution and/or in the community? (eg university, high school equivalents, training programmes, vocational education etc)
- What per cent of residents participate in the programmes?

- Are residents used as unpaid staff in the institution?
- Are residents allowed to work outside of the institution?
- Are they paid equally to others in the community?
- How do residents find a job? Explain the process.

#### Part 9 Freedom of religion

(Sources: staff, residents and observation)

- What accessible opportunities do people have for religious worship of their choice? (inside and outside the institution)
- Describe any obligatory religious practices (give details)

#### Part 10

#### **Correspondence and visitors**

(Sources: staff and residents)

- Is it possible for residents to correspond in private with anyone, via postal letters, telephone or email without any limitations or restrictions?
- Can residents freely access the telephone in private?
- Are personal mobile phones allowed?
- How do residents access the internet?
- Can they do this in private?
- Do staff ever read incoming or outgoing mail? Why?
- Do staff encourage residents to keep contact with people living outside the institution? How?
- How do staff provide residents with assistance, if required, to use the telephone or the internet, or to write letters?
- Are visitors unreasonably restricted in the hours they can visit? Can children visit and what provision is made for this?
- What facilities are there to meet with visitors in a private place?
- Is anyone restricted from having visitors? On what grounds?



#### Family and privacy rights

(Sources: staff and residents) Introductory question:

• Do you have possibilities for privacy and private life? (living conditions, sexuality, personal hygiene)

#### 11.1 Marriage

• Can people get married?

#### 11.2 Contraception

- Are choices in forms of contraception freely available?
- Are any residents given contraceptives (eg the pill or depot) without consent?
- Are the side effects of contraception discussed when seeking consent for such treatment?

#### 11.3 Pregnancy and parenting

- Are women residents here allowed to become pregnant?
- How many residents became pregnant in the last 12 months?

- How does the institution respond to pregnancies?
- What kind of parenting support is available?
- Is it possible for the parent(s) and the child to stay together?

#### 11.4 Abortion

- When was the last time a resident here had an abortion?
- Who decides that an abortion should occur?
- Can this decision be appealed? (give details)
- Who is informed about the initiation of carrying out an abortion? (looking for them to answer that spouse/family/relatives are informed; this is a very serious procedure)
- What are the procedures for informed consent?
- What information is given to the resident about abortion?
- Are abortions ever performed without the consent of the resident? (give details)
- What support is given to the resident before and after an abortion?
- If there is a resident who has had an abortion, the monitor might speak to her about the entire process (decision-making, consent, outcome/ complications) if she agrees

#### 11.5 Sterilisation

- What are the procedures for free and informed consent?
- What information is given to the resident about the sterilisation?
- Who decides that sterilisation should occur?
- Can this decision be appealed? (give details)
- Who is informed about the initiation of the sterilisation? (looking for them to answer that spouse/family/ relatives are informed; this is a very serious procedure)
- Are sterilisations performed without the informed consent of the resident?
- What support is given to the resident before and after the procedure?

### Part

### Freedom of expression and opinion, and access to information

(Sources: staff and residents)

- Can residents freely express their opinions, raise questions and complaints without negative consequences from the staff?
- How do residents receive information on important issues such as the rules of the institution, their rights, or on advocacy/ self-help groups?
- Is information provided relevant and understandable and in the languages of the residents?

#### Part 13

## Freedom from torture, ill-treatment, abuse and neglect

(Sources: staff, residents, documentation)

- Is there any evidence of torture, ill-treatment, abuse or neglect?
- Have residents made allegations of being mis-treated, abused or neglected? (give details)
- How have such allegations been responded to?

#### **Restraint and seclusion**

(Sources: staff, residents, documentation and observation)

- What types of restraint are used?
  (eg handcuffs, leather straps, cage beds, or medication)
- Is seclusion used? If yes, see the seclusion room.
  Take note on size, location, availability of facilities, including toilets, window, overall condition, ability to contact staff in case of emergency
- Under what circumstances is restraint/ seclusion used?
- How often is restraint/seclusion used and for how long?
- What is the longest time someone has been put in seclusion or restraint in the past year?
- Who authorises restraint/seclusion and under what circumstances?
- How is use of restraint/seclusion reviewed and terminated?
- Are residents allowed out of restraint/seclusion for the toilet or at other times?
- What human contact do people in restraint/ seclusion or seclusion have?
- Is restraint/seclusion ever used as punishment?
- How is use of seclusion recorded?
- Is seclusion or restraint used because of insufficient human resources/staff?
- Is there any regular external inspection of restraint/seclusion policies and practices?

#### Part 15

#### **Habilitation and rehabilitation**

(Sources: staff, residents, documentation) Introductory question:

- Are you allowed to take responsibility for yourself and to do meaningful things?
   (eg everyday tasks, hobbies, studies)
- What therapeutic and re/habilitative activities are available? (eg these may include creative activities such as art or music therapy, or may include occupational therapy and opportunities to learn new skills)
- What choice do residents have about which activity they would like to do?
- Are these meaningful and enjoyable activities or merely repetitive and boring tasks?
- Are any forms of peer support available?

#### Part 16

#### **Consent to treatment**

(Sources: staff, residents, documentation)

- What is the procedure used in this unit/ institution to gain informed consent to treatment?
- Describe what the institution understands as consent to treatment
- What happens if the resident refuses treatment? (does the institution respect the decision, can such decisions be ignored, and under what circumstances?)
- Can treatment ever be imposed? (give details)
- How can a resident appeal against a decision to treat without consent?
- Are involuntary treatment orders reviewed systematically by an independent body?

#### **Access to physical health care**

(Sources: residents and staff)

- Are there any difficulties in getting physical health care for those who require it?
- What have been the most important physical health problems in the last year?
- Do residents have access to regular physical health care check ups?
- What happens when residents need specialised physical healthcare assistance?
- Who pays for physical health care costs?
- What expenses must the residents cover and is this affordable?
- What happens to residents who can't cover these expenses?
- Are there other barriers to accessing physical healthcare?

#### Part 18

#### **Access to mental health services**

(Sources: residents and staff)

- Can residents see a psychiatrist or other mental health professional when they want?
- How often does a resident usually meet with a psychiatrist or mental health professional?
- About how many hours each week is there a psychiatrist or mental health professional present in this unit?
- Do residents have a choice of psychiatrist or mental health professional?
- How long does a meeting with a psychiatrist or mental health professional usually last?
- Are these meetings in private?
- What types of assessment and treatment are available in a mental health crisis?

#### Part 19

# Access to general practitioners/family physicians

(Sources: residents and staff)

- Can residents see a general practitioner of their choice when they need?
- What sort of training does the general practitioner have in dealing with the health care needs of people with mental health problems?
- What sort of training does the general practitioner have in dealing with the health care needs of people with intellectual disabilities?

### Part

#### **Access to nurses and care staff**

(Sources: residents and staff)

- Can residents see a nurse or member of the care staff when they want?
- Do nurses and care staff have specialist training in mental health care?
- What is the general quality of care given by nurses and care staff?
- How therapeutic and person-centred are the attitudes of the nurses and care staff?
- About how many hours each week is there a qualified nurse present in this unit?

#### **Access to therapies**

(Sources: residents and staff)

- Can residents see a psychological therapist?
- Can residents see a psychological therapist of their choice?
- Can residents see a social worker/social therapist of their choice?
- Can residents see an occupational therapist of their choice?

#### Part 22

#### **Health records**

(Sources: residents, staff, documentation)

- Are case notes comprehensive, ordered and intelligible?
- Are they appropriately confidential?
- Are case records freely available to those who need to access them, including residents?

#### Part 23

## Physical health promotion and physical liness prevention

(Sources: residents, staff, documentation)

- Do residents have access to the appropriate quality of health promotion and illness prevention services, taking into account the high levels of physical illness among people with mental health problems (eg vaccinations, diabetes checks, mammograms?)
- Are residents weighed on admission and regularly thereafter?
- Are there accessible facilities for physical exercise?
- Are there barriers to using such facilities?
- Do regular physical health checks take place to detect cancer?

#### Part 24

#### **Medication for mental and physical conditions**

(Sources: residents, staff, documentation)

- Are prescribed medications regularly available and affordable to residents?
- Are medications administered in accordance with agreed clinical practice guidelines?
- Are medications stored appropriately?
- Are side effects reported by residents taken seriously by staff and acted upon?
- Are resident preferences for medication acted upon by staff (eg for route of administration)?
- Is there any evidence of over-medication of residents to ease management of the institution rather than for an individual's personal benefit? (eg observe physical side effects of some medications – are people drowsy drooling, unable to communicate, shuffling)
- Is there any evidence that staff on duty are given too much discretion in using medication? (eg in the use of sedating 'as required' medications)
- What happens when a resident does not want to take their medication?
- Is there a written record of residents' treatment and dosages?
- Is the dosage appropriate to the clinical condition and not given for the convenience of staff or for punishment of the residents?

#### Physical health assessment on admission

(Sources: residents, staff, documentation) Introductory question:

- Was your physical health condition examined when you came here?
- Is a resident's physical health assessment routinely undertaken upon admission and on the basis of informed consent?
- Who performs this assessment?
- Are the findings of the assessment and any treatment implications clearly explained to the resident?
- Is this medical assessment performed with due respect to gender, cultural and religious background?
- What happens if a resident refuses the examination?

#### Part 26

#### **Diagnosis (physical and mental)**

(Sources: residents, staff, documentation)

- Do qualified practitioners undertake an assessment leading to a physical health diagnosis?
- Do qualified practitioners undertake an assessment leading to a mental health diagnosis?

#### Part 27

#### **Electro-Convulsive Therapy (ECT)**

(Sources: residents, staff, documentation)

- Is ECT given in the institution? If so, for what reasons?
- Is ECT ever given without sedation/anaesthesia/ muscle relaxants?
- Are the details of each ECT treatment recorded?
- What side effects are reported?
- Is ECT used in a way that is perceived by residents as a form of punishment?
- What happens if a resident refuses ECT?

#### Part 28

#### Alcohol, cigarettes and illegal drugs

(Sources: residents, staff, documentation)

- Is alcohol available to residents on the same basis as in the local community?
- Are cigarettes available to residents on the same basis as in the local community?
- Is attention paid by staff to the use of illegal drugs by residents?
- What types of assistance/support is available for residents with:
- 1 Alcohol problems?
- 2 Smoking problems?
- 3 Drug problems?

#### Part 29

### Involvement in care plans

(Sources: residents, staff, documentation) Introductory question:

- How have you participated in the decision-making and plans regarding your treatment and rehabilitation?
- Does each resident have his/her own care plan?
- How involved are residents in forming their care plans?

- Can residents question and challenge the content of their care plans?
- Do care plans specify individualised medication and therapeutic arrangements?
- How often are plans reviewed?
- Are care plans made available in languages understandable to residents?

#### **Consent to participate in research**

(Sources: residents, staff, documentation)

- Is there a written consent process to participate in research?
- Is there an independent process of ethical approval for research projects?
- Do potential participants have enough information to make an informed choice?
- Is research carried out on people who are legally detained?
- Is research carried out on people who do not have the capacity to consent?
- If medical research is being conducted in the institution on people who are detained, or do not have the capacity to consent, who has been informed of the research?
- Is payment being received?
- Are there any restrictions on accessing usual care for residents who do not agree to participate in research?