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CUBIC Questionnaire

A workplace culture program targeting confidence and competence in nurses to prevent, recognize, and respond to clinically deteriorating patients in mental health units

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4	Diagon tisk the continue to							
1	Please tick the option t	nat best applies to you						
	\square_1 Clinician	\square_2 Manager	\square_3 Educator	\square_4 Prefer not to say				
2	What is your usual Job	Title?						
3	What is your highest ed	ducation level?						
	\square_1 Associate Diploma \square_2 Diploma \square_3 Bachelor of Nursing \square_4 Graduate Certificat		\square_5 Graduate Diploma \square_6 Masters \square_7 PhD \square_8 Other (please specif	fy)				
4	Which hospital / ward	/ unit do you usually wor	k in?					
	Hospital		Ward / Unit					
5a	How many years (in tot	tal) have you worked as a	a <u>Nurse</u> ?					
	\square_1 0-2 years	\square_2 3-5 years	\square_3 6-10 years	□ ₄ 11+ years				
5b	How many years (in to	tal) have you worked as a	a nurse in <u>Mental Health</u>	?				
	\square_1 0-2 years	\square_2 3-5 years	\square_3 6-10 years	□ ₄ 11+ years				
6	How many years (in total) have you worked in the Mental Health Unit at Bankstown, Campbelltown or Liverpool Hospitals?							
	\square_1 0-2 years	\square_2 3-5 years	\square_3 6-10 years	\square_4 11+ years				
7	Employment status							
	\square_1 Full-time	□ ₂ Part-time	□ ₃ Casual					

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The **Organizational Culture Assessment Instrument** (OCAI) consists of six questions. Each question has four alternatives. Divide 100 points among these four alternatives depending on the extent to which each alternative is similar to your own organisation. Give a higher number of points to the alternative that is most similar to your organisation. For example, in question one, if you think alternative A is very similar to your organisation, alternative B and C are somewhat similar, and alternative D is hardly similar at all, you might give 55 points to A, 20 points to B and C, and five points to D. Just be sure your total equals 100 points for each question.

Please read all options before assigning points. For the purpose of the following questions (OCAI), "organisation" means your unit / ward.

1	Dominant Characteristics	Points
А	The organisation is a very <i>personal</i> place. It is a lot like an extended family. People seem to share a lot of themselves.	
В	The organisation is a very <i>dynamic and entrepreneurial</i> place. People are willing to stick their necks out and take risks.	
С	The organisation is very <i>results oriented</i> . A major concern is with getting the job done. People are very competitive and achievement oriented.	
D	The organisation is a very <i>controlled and structured place</i> . Formal procedures generally govern what people do.	
	Total (A to D adds up to 100 points)	100

2	Organisational Leadership	Points
А	The leadership in the organisation is generally considered to exemplify mentoring, facilitating, or nurturing.	
В	The leadership in the organisation is generally considered to exemplify entrepreneurship, innovating, or risk taking.	
С	The leadership in the organisation is generally considered to exemplify a nononsense, aggressive, results-oriented focus.	
D	The leadership in the organisation is generally considered to exemplify coordinating, organizing, or smooth-running efficiency.	
	Total (A to D adds up to 100 points)	100

3	Management of Employees	Points
А	The management style in the organisation is characterized by <i>teamwork</i> , consensus, and participation.	
В	The management style in the organisation is characterized by individual <i>risk-taking, innovation, freedom, and uniqueness</i> .	
С	The management style in the organisation is characterized by hard-driving competitiveness, high demands, and achievement.	
D	The management style in the organisation is characterized by security of employment, conformity, predictability, and stability in relationships.	
	Total (A to D adds up to 100 points)	100

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4	Organisational Glue	Points
Α	The glue that holds the organisation together is <i>loyalty and mutual trust</i> . Commitment to this organisation runs high.	
В	The glue that holds the organisation together is <i>commitment to innovation</i> and development. There is an emphasis on being on the cutting edge.	
С	The glue that holds the organisation together is the emphasis on <i>achievement</i> and goal accomplishment. Aggressiveness and winning are common themes.	
D	The glue that holds the organisation together is <i>formal rules and policies</i> . Maintaining a smooth-running organisation is important.	
	Total (A to D adds up to 100 points)	100

5	Strategic Emphases	Points
А	The organisation emphasizes human development. <i>High trust, openness, and participation</i> persist.	
В	The organisation emphasizes acquiring new resources and creating new challenges. Trying new things and prospecting for opportunities are valued.	
С	The organisation emphasizes <i>competitive actions and achievement</i> . Meeting key performance indicators, winning and being better than other hospitals is most important.	
D	The organisation emphasizes <i>permanence</i> and stability. Efficiency, control and smooth operations are important.	
	Total (A to D adds up to 100 points)	100

6	Criteria of Success	Points
А	The organisation defines success on the basis of the development of human resources, teamwork, employee commitment, and concern for people.	
В	The organisation defines success on the basis of having the most <i>unique</i> or <i>innovative</i> model of care. It is a hospital renowned of being a leader and <i>innovator</i> .	
С	The organisation defines success on the basis of winning and being better than other hospitals. Competitive leadership is key.	
D	The organisation defines success on the basis of efficiency. Dependable delivery, smooth scheduling and being cost-conscious are critical.	
	Total (A to D adds up to 100 points)	100

For th	ress recognition. e purpose of the following questions (SAQ), "Unit management" is sital management" is Mental Health LHD Management.	youi	unit	: / wa	ırd, a	ınd	
No	Item	Strongly Disagree	Slightly Disagree	Neutral	Slightly Agree	Strongly Agree	Not applicable
1	Nurse input is well received in this clinical area.						
2	In this clinical area, it is difficult to speak up if I perceive a problem with patient care.						
3	Disagreements in this clinical area are resolved appropriately (i.e., not who is right, but what is best for the patient).						
4	I have the support I need from other personnel to care for patients.						
5	It is easy for personnel here to ask questions when there is something they do not understand.						
6	The physicians and nurses here work together as a well-coordinated team.						
7	I would feel safe being treated here as a patient.						
8	Medical errors are handled appropriately in this clinical area.						
9	I know the proper channels to direct questions regarding patient safety in this clinical area.						
10	I receive appropriate feedback about my performance.						
11	In this clinical area, it is difficult to discuss errors.						
12	I am encouraged by my colleagues to report any patient safety concerns I may have.						
13	The culture in this clinical area makes it easy to learn from the errors of others.						
14	My suggestions about safety would be acted upon if I expressed them to management.						
15	I like my job.						
16	Working here is like being part of a large family.						
17	This is a good place to work.						
18	I am proud to work in this clinical area.						
19	Morale in this clinical area is high.						

The **Safety Attitudes Questionnaire** (<u>SAQ</u>) consists of 36 questions assessing attitudes towards teamwork climate, job satisfaction, perceptions of management, safety climate, working conditions,

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		1		-			
No	ltem	Strongly Disagree	Slightly Disagree	Neutral	Slightly Agree	Strongly Agree	Not applicable
20	When my workload becomes excessive, my performance is impaired.						
21	I am less effective at work when fatigued.						
22	I am more likely to make errors in tense or hostile situations.						
23	Fatigue impairs my performance during emergency situations (e.g., emergency resuscitation, seizure).						
24a	Unit management supports my daily efforts.						
24b	Hospital management supports my daily efforts.						
25a	Unit management doesn't knowingly compromise pt safety.						
25b	Hospital management doesn't knowingly compromise pt safety.						
26a	Unit management is doing a good job.						
26b	Hospital management is doing a good job.						
27a	Problem personnel are dealt with constructively by our unit management.						
27b	Problem personnel are dealt with constructively by our hospital management.						
28a	I get adequate, timely information about events that might affect my work, from unit management.						
28b	I get adequate, timely information about events that might affect my work, from hospital management.						
29	The levels of staffing in this clinical area are sufficient to handle the number of patients.						
30	This hospital does a good job of training new personnel.						
31	All the necessary information for diagnostic and therapeutic decisions is routinely available to me.						
32	Trainees in my discipline are adequately supervised.						
33	I experience good collaboration with nurses in this clinical area.						
34	I experience good collaboration with staff physicians in this clinical area.						
35	I experience good collaboration with pharmacists in this clinical area.						
36	Communication breakdowns that lead to delays in delivery of care are common.						

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Overall, what do you like most about your job?			
Overall, what do you like least about your job?			
Do you have any other comments?			

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The f	ollowi	ng questions asl	k about your expe	erience managing medically	dete /	rio	ratin	g pat	ients		
1	Have	you attended tl	he <u>DETECT</u> (Betwo	een the Flags) course?							
	□ ₁ Y	es	\square_2 No	\square_3 Unsure							
	If yes	s, what year?									
2	Have	you attended tl	he <u>Advanced Life</u>	Support course?							
	□ ₁ Y	es	\square_2 No	\square_3 Unsure							
	If yes	s, what year?									
								I	I		
						agree	gree		ree	gree	able
						SIU (II	Slightly Disagree	Neutral	Slightly Agree	Strongly Agree	Not applicable
					1	strongly Disagree	Slight	2	Sligh	Stror	Not a
	Atte	ndance at the D	ETECT course has	improved my practice in t	ne						
3a		cal environment		, , ,							
3b		ndance at the <u>A</u> tice in the clinic		<u>oort</u> course has improved r	ny						
4	Were	e you involved in	a MET response	in the past twelve months	?						
	□ ₁ Y	es	\square_2 No								
5	Were	e you happy with	n the way the ME	T response was managed?							
	□ ₁ Y	es	\square_2 No	\square_3 Prefer not to	answ	/er					
	5a	If yes, what ma	ade it work well?_								
	5b	If no, what wer	re the issues?								
	5c	What, if anythi	ing, do you think o	could have improved the N	IET re	spo	onse	?			

The following questions relate to educational planning.	DETE	`T			-2
6 How important is receiving education on the followi (1 = not at all important to 5 = very important)	ng DETEC	, i related	i educatio	onai topic	S?
	Not at a	←		—→ _{In}	Very nportant
	1	2	3	4	5
a. Recognition of the deteriorating patient	0	0	0	0	0
b . MET calling criteria	0	0	0	0	0
c. How to make a MET call	0	0	0	0	0
d. MET response (team roles, responsibilities)	0	0	0	0	0
e. Communication and leadership in a clinical emergency	0	0	0	0	0
f. Graded Assertiveness (communication with other health professionals to escalate patient care)	0	0	0	0	0
g. Scenario based training	0	0	0	0	0
h. MET documentation	0	0	0	0	0
i. Primary survey (the A-G approach)	0	0	0	0	0
j. Pathophysiology behind alteration of vital signs	0	0	0	0	0
7 Rate, from 1 to 5, how you would like this education (1 = least preferred to 5 = most preferred)Case studiesScenarios (simulation)Classroom teaching (didactic)Learning packages (hardcopy)Skills stations (individual task simulation)	delivere	d			

attitu	ambeth Triage In-situ Questionnaire was developed to assess knowled des towards managing medically deteriorating patients. It is being users (Lavelle, et al., 2017).	_	•				the
1	Please indicate to what extent you agree / disagree with the following	ng sta	atem	ents.			
			Strongly Disagree	Slightly Disagree	Neutral	Slightly Agree	Strongly Agree
а	I have no role to play in managing medically deteriorating patients						
b	Managing the medically deteriorating patient is best done interprofessionally						
U	Communication is not an important part of managing medically deteriorating patients						
d	I would be able to lead a team in managing a medically deterioratin patient	g					
е	Being able to manage a medically deteriorating patient is an essent part of my job	ial					
f	There are no clear policies and procedures to guide the management of medically deteriorating patients in my workplace	nt					
2	How confident are you in your						
		Not confident	Slightly confident	Somewhat confident	Mostly confident	Very confident	Completely confident
а	Knowledge of the policies and procedures for the management of medically deteriorating patient						
b	Ability to work effectively in a team in the management of a medically deteriorating patient						
С	Knowledge of individual roles and responsibilities in the management of a medically deteriorating patient						
d	Ability to communicate effectively in the management of a medically deteriorating patient						

of a medically deteriorating patient

е

f

Ability to collaborate with other professions in the management

Overall ability to manage a medically deteriorating patient

	ribed below is a typical scenario that could occur on your ward. We ask that you answer each of 5 questions as though you were providing care for this consumer.
Pleas	e be as specific as possible in your answers.
1.	Halfway through your shift you are walking to the toilet and, on passing John Smith's room, notice he is lying on his back on the floor. It is a common habit of John to do this, but you decide to ask if he is OK anyway. You call out to John and ask "how are you doing?" to which he does not reply. You start to approach him and repeat your question, again with no response. You realise he may be critically ill and activate your duress alarm.
	In attempting to systematically assess John, what considerations would you include in your assessment?
2.	While assessing John, you ascertain he is not breathing and has no pulse. Upon inspection of his airway, there is no obstruction, though John is still not breathing and there are no signs of life. Your colleagues arrive while this is happening. What steps would you and your colleagues now take in treating John?

n	ou and your colleagues have successfully resuscitated John who remains unconscious, but iow breathing normally. As this happens, the MET team arrive and begin to take over treatnef John. You are asked to hand over to the MET team.
	What main considerations would you use to frame this conversation to ensure that all the ecessary information is passed on?
_	
_	
_	
h	ou've successfully handed over to the MET team. While handing over, you and your colleag ave noticed some suspicious details regarding John's room and have concerns over how he eteriorated.
	ollowing handing over to the MET team, what steps are important for you to consider follow uch an incident?
_	
_	
	n the unfortunate event that John had died during resuscitation, what additional steps woul ou take following the incident (supplementary to those outlined above)?
_	
_	
_	
ŀ	* * * * * * * * * * * * * * * * * * * *
	Thank you for completing this questionnaire