EssenCES®
a short questionnaire for assessing the ward climate in forensic psychiatric institutions

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Ward Atmosphere
The interaction of aspects of the material, social, and emotional conditions of a ward, which may - over time - influence the mood, behaviour, and self concept of the persons envolved.
An old idea in psychiatric research is that there might be an important relationship between the social atmosphere in a psychiatric treatment unit and the results of the treatment.

Jansson & Eklund 2002

The concept of ‘ward atmosphere’ seems to have lost some scientific attention in recent years due to a strong focus on biological aspects of behaviour and on individual risk assessment in modern (forensic) psychiatry.

Hits in a Google research (May 2006):

“Ward climate” 91
“Ward atmosphere” 835
“Offender Risk Assessment” 5,370
Psychopathy 101,000
Climate-Traits measured by the Ward-Atmosphere-Scale (Moos & Houts 1968)

**Relationship Dimensions**
- involvement
- support
- spontaneity

**Personal Growth Dimensions**
- autonomy
- practical orientation
- anger and aggression
- personal problem orientation

**System Maintenance Orientation**
- order and organization
- program clarity
- staff control

10 items to each subscale!

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Questions with regard to the WAS-concept and any other climate assessment tool

- Research using factor analysis regularly found that a social environment can be described sufficiently on 3 to maximum 5 factorial dimensions.
- Research in forensic mental hospitals addresses patients with little formal education and limited intellectual capacity.
- Long questionnaires cause “missing data”.
- Items must be phrased very simply and clearly.
First Version of a short „Ward Climate Questionnaire“ (Schalast 1995)
⇒ focus of project: Staff, job stress and satisfaction

Climate traits:

**Experienced Safety** (vs. threat of violence)

**Experienced Success in therapeutic work**

**Atmosphere of the living environment**

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Intended “enlarged” version of a Climate Questionnaire (Schalast 2000)
⇒ focus of project: patients’ treatment motivation

Safety
Living Environment

**Experienced Success in therapeutic work**

- Patients’ Cohesion
- Holding Function (therapeutic support)
- Staff Control
“Final” version of a short assessment tool for the Ward Atmosphere in forensic psychiatry

Experienced Safety (vs. threat of violence)
Patients’ Cohesion and mutual Support
Therapeutic Hold and Support

5 items per dimension

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Essen Climate Evaluation Schema
Safety
(Experience of Safety vs. Threat of Violence)

Some patients are so excitable that one deals very cautiously with them.
Really threatening situations can occur here.
At times, members of staff are afraid of some of the patients.
There are some really aggressive patients on this ward.
Some patients are afraid of other patients.

Cronbach-Alpha for patients: 0.76 for staff: 0.79

Patients' Cohesion and mutual Support.

The patients care for each other.
Even the weakest patient finds support from his fellow patients.
There is good peer support among patients.
Most patients don’t care about their fellow patients' problems.
When a patient has a genuine concern, he finds support from his fellow patients.

Cronbach-Alpha for patients: 0.80 for staff: 0.76
Therapeutic Hold and Support

Staff members take a lot of time to deal with patients. Often, staff seem not to care if patients succeed or fail in treatment. On this ward, patients can openly talk to staff about all their problems. Staff take a personal interest in the progress of patients. Staff know patients and their personal histories very well.

Cronbach-Alpha for patients: 0.86 for staff: 0.73

Sample for testing the final version of the climate questionnaire (Germany 2004)

17 hospitals
46 wards
- 25 treating mentally ill offenders (§ 63)
- 21 treating addicted offenders (§ 64)

n = 333 employees n = 327 patients
Findings supporting validity

Robust factor structure in different subgroups of the sample.

„Therapeutic Hold“ and „Patients' Cohesion and Support“ correlate clearly with scales of other questionnaires assessing ward climate or patients' experiences in treatment.

No strong correlation with job satisfaction.

„Safety“ correlates (esp. among staff) clearly with the frequency of „problem events“ (daily hassle): $r = -0.62$ !

Climate scores are more favourable on wards with less restrictions (security).
Wards with a higher and lower level of security

Correlation of average climate assessments by patients and staff on 46 wards.

<table>
<thead>
<tr>
<th>Staff Assessments</th>
<th>Therapeutic Hold</th>
<th>Safety</th>
<th>Patients' Cohesion</th>
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</thead>
<tbody>
<tr>
<td>Therapeutic Hold</td>
<td>.53</td>
<td>.21</td>
<td>.35</td>
</tr>
<tr>
<td>Safety</td>
<td>.39</td>
<td>.42</td>
<td>.22</td>
</tr>
<tr>
<td>Patients' Cohesion</td>
<td>.20</td>
<td>.13</td>
<td>.59</td>
</tr>
</tbody>
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Ward climate research

Timko & Moos (2004) summarise findings gathered with the WAS and other Moos scales.

Many findings are correlative by nature. E.g.:

• “Patients in supportive programmes that emphasise self-direction, the development of social and work skills, and self-understanding tend to be more satisfied with treatment and to report that treatment enhanced their self-confidence.”
• “Characteristics of the treatment environment that were associated with better in-programme outcomes were also linked to better psychosocial functioning and integration in the community.”

Such correlation is to some degree trivial. [It confirms the validity of the questionnaire.] Characteristics of patients, of staff and of programs are confounded.

Some useful applications of a ward climate tool

Long term monitoring of treatment settings, using the questionnaire as a ‘clinical thermometer’.
Evaluation of conceptual measures on a ward.
Input for initiatives like a “Ward Climate Week”
Summary

A screening tool for assessing the social and therapeutic climate of forensic psychiatric wards was presented. Data from 46 wards demonstrate a stable trait structure and good validity of the German version of the instrument.

Three climate dimensions reflect basic needs of a patient in a forensic setting and seem of high relevance for staff too:

- **Experienced Safety** (vs. threat of aggression and violence)
- **Patients’ cohesion and mutual support**
- **Therapeutic Hold**.

English, German, Finnish and Dutch versions are available: www.forensik-essen.de