



# THE FIFTEEN STEPS CHALLENGE

Quality from a patient's perspective;  
A toolkit for clinics and  
outpatient settings



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## **THE 15 STEPS CHALLENGE: QUALITY FROM A PATIENT'S PERSPECTIVE; A TOOLKIT FOR CLINICS AND OUTPATIENT SETTINGS**

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“I can tell what kind of care my daughter is going to get within 15 steps of walking on to every new ward.”



## 1. BACKGROUND

- What do patients think about the care that they receive when they visit a clinic?
- How do they feel and what are their first impressions when they arrive at the clinic?

The NHS is committed to putting patients at the heart of what we do and it was a mother's comment at a patient and family involvement workshop that kick-started the 15 Steps Challenge. She told us about her daughter, whose condition needed frequent inpatient stays. She said, “ I can tell what kind of care my daughter is going to get within 15 steps of walking on to every new ward.”

This mum was not a clinician, but she made a significant point – first impressions are important! Patients, service users, families and carers very quickly know whether they feel confident about the service they are visiting but as health professionals how can we ensure their experience is as good as possible?

This quote inspired the development of a series of 15 Steps Challenge guides. They are toolkits which help organisations and teams gain a better understanding of how patients and service users feel about the care they receive. The toolkits help to explore patient experience and are a way of involving patients, carers and families in quality assurance processes.

The 15 Steps Challenge focuses on seeing care through a patient's eyes and exploring their first impressions. The Challenge helps staff to listen to patients and their carers, understanding what is working well and where services can be improved.

“The 15 Steps Challenge” is a [suite of toolkits](#) that explore different healthcare settings through the eyes of patients and relatives. With an easy to use methodology and alignment to NHS strategic drivers, these resources support staff to listen to patients and carers and understand the improvements that we can make.

The suite of toolkits includes:

1. The 15 Steps Challenge – **guidance for commissioners**
2. The 15 Steps Challenge – **inpatient services**
3. The 15 Steps Challenge – **mental health inpatient services**
4. The 15 Steps Challenge – **community services**
5. The 15 Steps Challenge – **children and young people’s inpatient services**
6. The 15 Steps Challenge – **clinics and outpatients**

The 15 Steps Challenge toolkits were originally developed in 2012 by the NHS Institute of Innovation and Improvement. All of the resources were developed in co-production with staff and service users to support patient and carer involvement in improving our health services. Used widely since their launch, the suite of 15 Steps Challenge tools have been refreshed by NHS England and stakeholder partners to take account of new NHS guidance. Due to popular demand, we have also added a new toolkit for commissioners to the suite of resources.

## 2. PURPOSE OF THE 15 STEPS CHALLENGE

### 2.1 First impressions count!

- When we first arrive in a healthcare setting, does it inspire confidence in the care that we are about to receive?
- How can first impressions make us feel that we will be safe and cared for?
- What are the first clues to high quality care?
- What does good care look, feel, sound and smell like?

#### The purpose of the 15 Steps Challenge is to:

- help staff, patients and others to work together to identify improvements that can be made to enhance the patient experience. It is a collaborative process and should include both staff and patient representatives.
- provide a way of understanding patients’ first impressions of the clinic environment more clearly and how this impacts on their initial experiences of care.
- support sharing good practice.

The 15 Steps Challenge uses a variation on mystery shopping observational approaches to understand what patients and carers experience when they first arrive in a healthcare setting. A small “15 Steps Challenge team” visit clinics and outpatient areas and take note of their first impressions. The team includes staff and patients working together. The team use the questions and prompts in the toolkits to guide their observations and then give structured feedback about their experience, including what is working well and what could be improved.

*"I found this overall to be a great tool. Questions posed are meaningful, relevant and add substance to provoke further discussion with patients and enable structured observation."*

**Clinical Development Lead,  
North Tees and Hartlepool NHS Foundation Trust**

By enabling service users' and carers' voices to be heard clearly, the tool can be used to gain an understanding of how people feel about the care provided, how high levels of confidence can be built and what might be done to increase service user confidence as part of a continuous improvement journey.

#### **The 15 Step Challenge IS NOT:**

- a performance management tool
- an audit (clinical, quality, safety or otherwise)



## **2.2 When should we use the 15 Steps Challenge tool?**

There is no set time for undertaking the 15 Steps Challenge. It is designed to support wider quality improvement work. The toolkits are flexible to fit in with different improvement approaches that your organisation is already using or might like to start implementing. It should be sponsored by the senior leaders and form part of wider improvement activity.

Feedback has shown that the Challenge is useful in the following contexts:

- As an additional element to any existing programme of regular Board walkarounds.
- As part of a regular patient experience review.
- As a structured toolkit to involve existing patient participation groups who are working with the organisation.
- As an additional component to any Patient-led Assessments of the Care Environment (PLACE) inspections that happen.
- Before formal quality assurance visiting, including Care Quality Commission (CQC) inspections, as an aid to see healthcare settings from a different perspective.

*"This tool doesn't require hours of work, it is quick and simple to use and we had really good feedback for our clinic team."*

**Health Visitor, Suffolk County Council**



### 3. HOW DOES THIS ALIGN WITH OTHER STRATEGIC INITIATIVES?

The 15 Steps Challenge has been developed to align and support a number of national strategic directions.

#### Care Quality Commission (CQC)

In every inspection the Care Quality Commission asks whether the service is safe, caring, effective, responsive to people's needs and well-led. They use a core set of [quality standards](#), refreshed in 2014, in their inspection of health services. Evidence of good practice identified through the 15 Steps Challenge may be useful material to supply in support of a Care Quality Commission inspection, or the development of a Quality Account report.

The 15 Steps Challenge can support evidence for the following CQC standards:

- care and treatment must be appropriate and reflect service users' needs and preferences.
- service users must be treated with dignity and respect.
- care and treatment must be provided in a safe way.
- service users must be protected from abuse and improper treatment.
- service users' nutritional and hydration needs must be met.
- all premises and equipment used must be clean, secure, suitable and used properly.

#### NHS Five Year Forward View

The NHS [Five Year Forward View](#) describes how important it is to have communities involved in designing better health services. Involving patients and the public in shaping NHS services is a vital part of how the NHS improves the quality of healthcare.

### National Institute for Health and Care Excellence (NICE)

NICE have a range of national evidence based quality standards that support better patient care, including:

- [“Quality standard for patient experience in adult NHS services: improving the experience of care for people using adult NHS services”](#) (published 2012)
- [“Quality standard for service user experience in adult mental health services”](#) (published 2011, reviewed 2016)

Information and insight taken from 15 Steps Challenge feedback can help inform a staff team how they are doing against a number of areas detailed in the standards.

### Royal College of Nursing

Several of the [Principles of Nursing Practice](#) describe putting patients at the centre of care, making sure they are respected, treated with dignity and as individuals.

*“This fits in so well with the work we are doing around the environment for people with dementia & our Caring for Carers.”*

**Ipswich Hospital NHS Trust Senior Nurse, Dementia Care**

## 4. IMPLEMENTING THE 15 STEPS CHALLENGE

### 4.1 In summary

To get started with the 15 Steps Challenge, make sure you have a co-ordinator and a senior sponsor, who can align the Challenge to wider patient experience and service improvement activity. Once you have recruited a small group of staff and patients/carers to be in your 15 Steps Challenge team, the team simply walk around the ward or clinic environment and stop and observe patients and staff in the public areas. The team use the headings and observation prompts in section 5 to help structure their thoughts and observations. The prompts encourage thoughts and discussions, they are not checklists. The Challenge team then feedback to the ward/clinic staff and Challenge co-ordinator, who then plan how to share any good practice observed and address any suggested improvements. Then repeat regularly as part of a quality assurance process!





## 4.2 Process

### 1 Identify an organisation sponsor and project co-ordinator

A **senior sponsor** within the organisation is essential. The sponsor ensures that the 15 Steps Challenge is aligned to strategic priorities for the organisation and supports a “Board to Ward” involvement. It is important to communicate with both the executive team and with frontline teams that the 15 Steps Challenge will be happening within the organisation. This preparation work is essential so that everyone is aware that it is a good way to get “fresh eyes” and service users/carers’ views on how to improve care. The Challenge offers a way for people to work together on improvement, it is not an audit! The organisation sponsor will also ensure that any corporate themes emerging from the Challenge can be addressed strategically

The **project co-ordinator** is the day to day lead for the Challenge (this may be your patient engagement lead or the clinic manager). They recruit and brief 15 Steps walkaround team. They co-ordinate any feedback from the process and follow up on any actions identified. They should let staff know that the walkarounds are happening, although it isn’t necessary to tell staff which wards or clinics will be visited.



## 2 Recruit and brief a 15 Steps Challenge team

The co-ordinator recruits and briefs a 15 Steps Challenge team; this is a small team of people who will undertake the clinic walkarounds (the “15 Steps Challenge team”). It must include staff and patient representatives and it is good practice to include staff with different perspectives e.g. patient engagement leads, ward based staff, healthcare assistants, therapists. Including non-clinical staff also brings valuable fresh eyes, for example, staff from human resources, estates or governance teams. Patient input can come from a range of sources, many current patients are happy to be involved in exercises like the 15 Steps Challenge. Alternatively the organisation may have a patient council or forum, or you could work with your local Healthwatch. Some organisations have invited patients who have recently complained to join the 15 Steps team and help identify improvements. The Patient Advice and Liaison Service (PALS) team can often help with this

The team should also include a Governor / Non-Executive Director and/or Executive Director. 15 Steps Challenge walkaround teams should aim to have three to four members, bringing different perspectives to each group. Aim to include a diverse group of people, for example disabled people and people of different ages and backgrounds.

The 15 Steps Challenge team should only need to meet together twice;

- 1) **Project “kick-off” meeting:** Usually takes place a few weeks before the day of the walkarounds. This meeting covers an overview of the Challenge and team introductions. Ensure that everyone is clear about the Challenge purpose and introduce them to the toolkit. The 15 Steps Challenge team should be reminded that any information they hear from patients as part of the 15 Steps Challenge is confidential and should only be used for the purposes of the Challenge (your organisation may have a confidentiality agreement that can be used). It is useful to cover practicalities including how many and which clinics will be part of the Challenge, dates and times of the walkaround, expectations on the day and any follow up that might be required.
- 2) **The Walkaround:** The team meet up to undertake clinic walkarounds. Arrangements will vary according to how you are using the Challenge, but you might undertake four clinic walkarounds weekly or monthly, or you might cover several departments over a day twice a year. After the walkarounds are completed, the team need to pass their feedback to both the clinics visited and to the Project Co-ordinator.

## 3 Inform clinic staff about the 15 Steps Challenge

The co-ordinator informs staff that the Challenge will be happening (but not when). It is important to reassure staff that the Challenge is about listening to patients’ perspectives and identifying what is working well and where improvements can be made.

## 4 Undertake the 15 Steps Challenge clinic walkaround

The 15 Steps Challenge team undertakes the walkaround. Use your senses to build up your first impressions and then explore the clinic further. The focus is on first impressions. What do patients and visitors see? What is important to them?

Use the four headings and observation prompts in section 5 to structure your thoughts and record your comments.

The walkaround might take approximately an hour:

- Arrive before the first clinic appointment time
- Spend 20 minutes in reception
- Spend 20 minutes in waiting rooms
- Spend 10 minutes walking the space
- Go back to reception – spend another 10 minutes there – what has changed now that it is busier?



## 5 The 15 Steps Challenge team feed back to the teams and the organisation sponsor

Once the walkaround has taken place in the clinic, the 15 Steps Challenge team gather together and consider their first impressions. Each of the Challenge team presents their thoughts and impressions whilst they are still fresh. Take time to discuss what each Challenge team member saw, heard and experienced. There is a template in Appendix A to summarise the feedback under each category explored. Everyone will have similar and different experiences during their walkaround. As a Challenge team it is important to discuss and note down aspects that made you feel confident about the care being given. This needs to be fed back to the clinic team and organisation sponsor to share and encourage the spread of good practice. It is important to note what could be changed to improve patient experience.

The 15 Steps Challenge team discuss and agree the following points:-

- What details will be fed back to frontline clinic staff?
- What themes will be fed back to the organisation sponsor? These are broader issues that have a more strategic link.

The findings are shared with the clinic team leader and organisation sponsor.

## 6 Appropriate actions (celebrations and improvements) are taken at clinic and organisational level

Appropriate actions are agreed and taken forward at clinic level and at organisational level. There is a template in Appendix B to help you do this.

## 7 Repeat the 15 Steps Challenge at regular intervals

Repeat the 15 Steps Challenge at regular intervals to identify and promote continuous improvement.

*"I think it captures what is important for patients and for us."*

**Head of Service/Matron, Nottingham University Hospitals NHS Trust**

### 4.3 Practical tips for giving feedback

Constructive feedback is important. Identify someone in the 15 Steps Challenge team who will give the feedback, and ensure that they have the skills for delivering constructive comments. Feedback to the clinic team on the same day is vital. Remember, they have been under scrutiny from the 15 Steps Challenge team and this makes everyone anxious. Make sure that the clinic leader hears the team's comments as soon as possible. Give feedback verbally and agree if further written information would be helpful.

Good feedback is:

- **timely**
- **constructive and honest**
- **courteous**



### Golden rules for feedback

1. Avoid delays - delays in feeding back can result in reduced momentum and power of the recommendations.
2. Plan in advance how you are going to give feedback – who will do this from the 15 Steps Challenge team?
3. Encourage staff to feel part of the process in advance so that it doesn't feel like a "them and us" situation.
4. Encourage the recipients of feedback to undertake their own self-assessment before giving feedback from patients e.g. "What do you think patients are saying specifically about how they experience our service?"
5. Provide non-judgemental feedback which is truthful, direct and constructive.
6. In feeding back, offer some positive examples, followed by some recommendations for improvement and end with some positives. This is a constructive way to deliver feedback.
7. Enable recipients to give feedback on how they found the process and the feedback to understand how it could be more effective.
8. Ensure that there is an opportunity for staff to action plan based on feedback and have ways to share good practice.

*(Adapted from Royal College of Nursing, Workplace resources for practice development)*

## 5. THE WALKAROUND – WHAT TO LOOK OUT FOR PROMPTS

Aligned with CQC standards and evidence about what matters to patients, the 15 Steps Challenge toolkit asks the team to explore the quality of care under the following headings;



Welcoming  
and caring



Well organised  
and calm



Informative

Each of the headings follow the same format. There are some questions and prompts help your observations. These are not designed to be used as a checklist or "clipboard" exercise but to help you to structure some of the quality indicators that you may have subconsciously noticed.



# Welcoming and caring



# Well organised and calm



Questions to ask yourself	Comments
<ul style="list-style-type: none"> <li>Was it easy to locate the clinic?</li> <li>On entering the venue, what is my first impression? Which word / phrase describes my feeling?</li> <li>What is the atmosphere like – calm / busy / warm / cold / bright / clean?</li> <li>What is welcoming about the area?</li> <li>Is the process for booking in clear?</li> <li>How do staff greet patients?</li> <li>How is dignity and privacy respected?</li> <li>How are staff interacting with patients?</li> <li>What makes me feel less confident?</li> </ul> <p><b>Things to look out for</b></p> <ul style="list-style-type: none"> <li>Car parking is accessible to all? Think about patient mobility.</li> <li>The route to the clinic is well signed.</li> <li>Information on how to book in is evident and clear.</li> <li>Staff are visible.</li> <li>There is evidence of meeting diverse needs (e.g. signs in other languages, the reception desk and waiting areas are accessible for wheelchair users).</li> <li>Do patients have to wait to book in? How is this managed?</li> <li>Patients' privacy is considered.</li> <li>Staff acknowledge patients on arrival – eye contact, smiles, greetings.</li> <li>Staff introduce themselves to patients.</li> <li>Patient comfort is considered (seating/ refreshments).</li> <li>There is an area and/or toys to occupy children who may be in the waiting area.</li> <li>Toilet signs are clear.</li> </ul>	

Walkaround undertaken on.....  
 by .....(names of 15 Steps team)  
 Name of clinic:.....

Questions to ask yourself	Comments
<ul style="list-style-type: none"> <li>Is the area well set out / organised / uncluttered?</li> <li>Does the area look clean / does it smell clean?</li> <li>Are equipment / notes stored tidily and with respect for confidentiality?</li> <li>If there are other areas (e.g. cupboards, stock room, kitchen) do they look organised, clean and uncluttered?</li> <li>What are my first impressions of staff professionalism, competency and efficiency?</li> <li>What do the interactions between staff, patients and other visitors tell me?</li> <li>Can I observe good team work taking place?</li> </ul> <p><b>Things to look out for</b></p> <ul style="list-style-type: none"> <li>Seating area well set out - comfortable chairs, room for wheelchairs.</li> <li>Well maintained, appropriate and clean condition of floors (non slip) / walls / windows / ceilings.</li> <li>Equipment stored tidily in 'set' places and managed effectively (colour coding / stock levels indicated).</li> <li>Clean uncluttered corridors.</li> <li>Clean toilets.</li> <li>Visible clock.</li> <li>Patient queues are well managed (not out of doors leading to confusion).</li> <li>Patients who are transported to the clinic in beds or wheel chairs are transported with dignity and appropriately.</li> </ul>	

Walkaround undertaken on.....  
 by .....(names of 15 Steps team)  
 Name of clinic:.....



Questions to ask yourself	Comments
<ul style="list-style-type: none"> <li>• Are clinics running to time, how are delays managed?</li> <li>• Are notice boards / patient information stands up to date, clearly set out and holding relevant information?</li> <li>• Is there information about where I go and wait and what I need to do?</li> <li>• What information is given about the use of mobile telephones?</li> <li>• What tells me about the quality of care here?</li> <li>• Is there evidence of patient safety and infection control?</li> </ul> <p><b>Things to look out for</b></p> <ul style="list-style-type: none"> <li>• There is information relevant to patients displayed in a suitable area.</li> <li>• Patient information leaflets appear organised.</li> <li>• There is information on who the team are and what the uniforms mean.</li> <li>• Can you tell who is in charge?</li> <li>• There is information on which consultants / nurses are running clinics.</li> <li>• Is the mobile telephone policy clear? It may be acceptable for patients to use mobile telephones to reduce stress.</li> <li>• There is information on how to make a complaint, compliment or suggestion.</li> <li>• There is evidence of encouraging and acting on patient feedback e.g. "You said... We did".</li> </ul>	

Walkaround undertaken on.....  
 by .....(names of 15 Steps team)  
 Name of clinic:.....

## 6. FROM FEEDBACK TO ACTION

Having identified what is working well, where there are good practice ideas and what can be improved, it is important to make sure sharing and improvements actually happen.

There may be actions that are relevant for different levels of the organisation. The organisation sponsor, the 15 Steps Challenge team and co-ordinator should decide what actions can be taken forward by the clinic team and what actions need more corporate input and involvement. There is template in Appendix B to assist with this process.

The 15 Steps Challenge is designed to support continuous improvement. It is not a one off activity but should be a regular part of improving the care provided by your clinic staff. The tool focuses on what matters to patients.

1. Using the feedback from individual clinics and the key themes that have emerged from the Challenge as a whole, the Challenge co-ordinator **decides with the clinic leaders and the organisation sponsor** what actions will be taken at a clinic level and what actions are needed at a organisation wide or strategic level.
2. **Record** what the actions are, who is taking these forward and by when.
3. **Identify and celebrate the positives** – agree how the good practice will be shared and promoted (e.g. via team meetings, an organisation newsletter, emails celebrating good practice). A vital part of the 15 Steps Challenge is the rapid sharing of good ideas that other teams can replicate.
4. Be clever about your action plan – you may wish to develop an action plan specifically for the 15 Steps Challenge. However, teams can sometimes be inundated with action plans for a wide range of initiatives – **can some of the identified actions be linked to existing action plans**, for example training plans or estates maintenance plans? This way there is an existing process to ensure actions are done, monitored and reviewed.
5. **Review** the actions at an agreed date. Revisit the clinic walkarounds regularly. Agree to repeat the 15 Steps Challenge within a specific timescale. This will help keep track of the progress and improvements that are being made within the organisation.



## 7. EMBEDDING A PROCESS OF CONTINUOUS IMPROVEMENT

The 15 Steps Challenge is designed to support continuous improvement. It is not a one-off activity but should be regularly repeated. The way in which the 15 Steps Challenge is embedded will be different for each organisation, dependant on processes, structures and opportunities that already exist. The toolkit is designed to be flexible to fit in with local opportunities.

### Consider:

- Agreeing an organisation approach to regular 15 Steps Challenge walkarounds; what healthcare settings will be visited, over what time interval. Some organisations have decided to visit all of their clinics in one day and repeat this every six months. Other organisations have decided to randomly select settings to visit weekly, fortnightly, or quarterly to get a flavour of patients' views. Others have decided to add the 15 Steps Challenge to existing activities, including monthly "Quality Walkarounds", "Board to Ward" days, weekly "frontline focus" days, or the cycles of PLACE inspections.
- Visiting clinics that are receiving lots of positive patient feedback and clinics that have received complaints – what can be learnt and shared?
- Developing "You Said....We did....." information boards for clinic areas. This helps to inform patients and visitors of the improvements that are being made and gives real examples of how patients' views are listened to and acted on.
- Making this a part of the PALS and complaints response – where appropriate ask those who have complained to be part of a 15 Steps team identifying improvements.

- Involving a wide range of patients and carers in the 15 Steps Challenge teams. Ask former patients/carers if they would like to get involved, some organisations have asked current service users for their input.
- Undertaking clinic walkarounds at different times of the day, for example visiting times or evenings. How does the patient/carer experience change?
- Developing a pool of 15 Steps Challenge team members. Over time, having a pool of people will make sure that the visits and time commitments are shared by many people and not just a few. It will reduce the number of briefings that are required. It also ensures a large pool of “fresh eyes”.



## 8. NEED HELP?

For more information and copies of the other 15 Steps Challenge toolkits visit the [NHS England website](#).

### Contact us:

The Public Participation Team,  
NHS England,  
Quarry House,  
Quarry Hill,  
Leeds  
LS2 7UE

e-mail: [england.nhs.participation@nhs.net](mailto:england.nhs.participation@nhs.net)



# APPENDIX A - 15 STEPS CHALLENGE FEEDBACK TEMPLATE

The Reviewers: .....

Clinic/area:..... Date:.....

**Welcoming and caring:**

Positives	Recommendations

**Well organised and calm:**

Positives	Recommendations

**Informative:**

Positives	Recommendations

**Overall themes and comments:**

# APPENDIX B - ACTION PLAN TEMPLATE

Completed by: ..... Date: .....

**WELCOMING AND CARING:**

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

**WELL ORGANISED AND CALM:**

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?

**INFORMATIVE:**

Action required	Strategic theme	Who will do this?	By when?	Where will it be reported?



# ACKNOWLEDGEMENTS

The 15 Steps Challenge toolkits were originally developed by the NHS Institute for Innovation and Improvement, this organisation has subsequently become part of NHS England, within the Sustainable Improvement Team. The toolkits have been refreshed and updated in 2017.

The 15 Steps Challenge was developed in co-production with many stakeholders who support the NHS to improve quality of patient care. Staff, patients, volunteers and many others have contributed to the design and development of this challenge. We would like to thank them all for their enthusiasm and passion for improving patient care. They all brought valuable perspectives and expertise to the 15 Steps Challenge.

We would particularly like to thank those organisations who helped us with our research, or provided feedback and tested the toolkit.

- Central Surrey Health
- Doncaster and Bassetlaw Hospitals NHS Foundation Trust
- East Lancashire Hospitals NHS Trust
- North Tees and Hartlepool NHS Foundation Trust
- North York and Yorkshire Primary Care Trust
- Nottingham University Hospitals NHS Trust
- Royal Wolverhampton NHS Trust
- Southern Health NHS Foundation Trust
- Suffolk County Council
- Surrey Primary Care Trust

