# The Essen Climate Evaluation Schema EssenCES

Norbert Schalast Matthew Tonkin A Manual and More

(Eds.)



# **EssenCES**



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Norbert Schalast & Matthew Tonkin (Eds.)



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# **Preface**

Designed as a quick and easy tool to help assess the essential traits of the social and therapeutic atmosphere in forensic psychiatric settings (subsequently expanded for use in correctional facilities), the Essen Climate Evaluation Schema (EssenCES) was originally developed and first published in Germany. It has since been translated into a number of other languages and been included in a considerable number of studies, among them a broad validation study in the UK. Following this study and the UK Commissioning for Quality and Innovation (CQUIN) initiating the regular use of the scale in forensic psychiatric services in the UK, we have received a large number of enquiries regarding support in using the scale and interpreting its findings. In particular, many researchers and clinicians have requested reference norms that would allow them to compare the EssenCES scores obtained in their particular unit/service with the scores obtained in other settings.

This manual aims to respond to these enquiries. It outlines the background and the concept of the instrument and discusses the variety of ways in which the EssenCES might be used to support research and practice within forensic services. It also includes considerations regarding the limitations of previous studies that have utilised the concept of social climate and a discussion of how the contribution of climate evaluations might be further improved in the future.

Given the assumable differences between correctional (i.e., prison) settings and forensic psychiatric hospital (i.e., healthcare) settings in terms of function and resident demographics (such as mental health diagnosis), the statistical norms in this volume are presented separately for each setting. The statistical norms for healthcare settings are based on assessments of the social climate of 79 wards in forensic psychiatric hospitals (33 in the UK and 46 in Germany) made by hundreds of patients and staff. (In addition, we were able to include a data set from a current German project in calculating the normative values presented in the appendix, see p. 85) The statistical norms for correctional settings are based on data from 30 prison units (16 in the UK and 14 in Germany). Furthermore, thanks to the kind assistance of the Singapore Prison Service and Corrections Victoria, Australia, data from these countries are also presented.

While this manual presents statistical norms for the EssenCES, one may debate whether these samples are representative of the settings from which they were drawn, bearing in mind that the real sample size in social climate research is not the number of individual patients, prisoners or staff who complete a questionnaire but the number of units/wings/wards considered. From the editors' point of view, generating significant norms – notably for specific subgroups of institutions – is still a work in progress.

The EssenCES is used by two very different groups of professionals, whose varying interests we have considered carefully in designing this manual: the general staff of psychiatric and correctional institutions on the one hand, and academic staff and researchers familiar with psychometrics on the other hand. The manual tries to meet the needs of both groups. Most notably, Chapter 3 details the basics of handling and evaluating a questionnaire and using the EssenCES in practice, and a glossary explains statistical terms in a straightforward and accessible manner. Other chapters discuss psychometric properties, referring to a number of concepts in psychological test theory and its statistical procedures.

Whether or not to include EssenCES total scores in the manual was a matter of considerable debate. In the recent literature presenting EssenCES findings, total score statistics have usually been provided. However, the original idea of the EssenCES was not to provide a single, overall measure of the social climate but, instead, to identify a small number of dimensions that would obviously be relevant to measuring and describing climate in a wide range of settings. In discussing a ward's or institution's climate assessment, it is better to refer to these specific profiles than to a total score. Therefore, the manual does not provide total score statistics and does not encourage the use of EssenCES total scores. That said, researchers who still want to explore and discuss the significance and validity of EssenCES total scores may contact us for a compilation of total score statistics from validation studies discussed in this manual.

We hope that this manual proves useful to our readers and encourage user feedback — we'll be happy to receive any comments, criticism, or additional data that might help further develop the measure. Feel free to e-mail us: norbert.schalast@uni-duisburg-essen.de or matthewjtonkin@googlemail.com.

Norbert Schalast & Matthew Tonkin

# Acknowledgments

The editors express their gratitude to Prof. Andrew Day and Dr. Sharon Casey, Deakin University, Australia, who communicated the data from Singapore Prison Service and Corrections Victoria, Australia, and contributed to this manual. They also thank Dr. Mark Freestone, who reviewed early drafts of this manual.



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# 1 Overview

#### **Norbert Schalast & Matthew Tonkin**

## Aims and Background of the EssenCES

The Essen Climate Evaluation Schema (EssenCES) is a short questionnaire, originally developed for assessing essential traits of the social and therapeutic atmosphere of forensic psychiatric wards, which is a crucial factor for the health and well-being of both staff and patients as well as the outcome of interventions. Beginning in 1993, different sets of questionnaire items were evaluated in a series of studies. The aim was to identify independent social climate traits stable across different settings and samples. The questionnaire was intended to be shorter and more economical than the well-known Ward Atmosphere Scale (WAS; Moos, 1996; Moos & Houts, 1968), with a simpler and more stable *trait structure* (see Chapter 2). The outcome of this process was a 15-item instrument (with an additional opening and concluding item that are not scored), that became the Essen Climate Evaluation Schema (EssenCES). It measures three dimensions of the social climate:

- Therapeutic Hold
- Patients' Cohesion and Mutual Support, and
- Experienced Safety (vs. the threat of aggression and violence).

#### **Versions of the EssenCES and Web Information**

The EssenCES was originally developed for use in forensic psychiatric wards, i.e., hospital environments. It has since been modified for additional use in correctional and prison settings, requiring only minor adaptions of wordings (such as "wing" instead of "ward," "inmate" instead of "patient," etc.). For correctional settings, the climate dimensions are, respectively, labelled

- Hold and Support,
- Inmates' Cohesion, and
- Experienced Safety.

Translations have further expanded the scope of EssenCES use. The instrument is now available in a number of European and non-European languages, including (but not limited to) Danish, Dutch, English, Finnish, German, and Japanese. These versions and additional information are available for download from the website of the Institute of Forensic Psychiatry in Essen, Germany (www.forensik-essen.de).

One and the same questionnaire is used for all individuals involved in the climate evaluation, i.e., both staff and patients (or inmates/prisoners), facilitating the comparison of assessments by these two groups in any setting.

#### **Research and Publications**

In Germany, a validation study was conducted in 2007, that included 46 wards within 17 forensic mental hospitals (Schalast, 2008; Schalast, Redies, Collins, Stacey, & Howells, 2008). Patients and staff completed the EssenCES as well as other questionnaires, among them the WAS and a Good Milieu Index (Friis, 1986; Røssberg & Friis, 2003a). Problematic occurrences (such as drug use relapses, threatening face-offs, willful damage to property, etc.) were listed and counted on each ward over a period of three weeks. The intended three-factor structure of the instrument was clearly confirmed and high *correlation* coefficients supported the subscales' *validity* (see Chapter 5).

A comparably comprehensive study was later conducted in the UK (see Tonkin et al., 2012). Data were collected from 33 wards within forensic psychiatric hospitals, but also from 16 wings across 4 prison services. Findings provided further support for the instrument's psychometric qualities (see Chapter 5).

Since these validation studies, research applying the EssenCES has grown rapidly, partly due to the scale having been adopted by a large number of forensic healthcare services across the UK as part of the Commissioning for Quality and Innovation (CQUIN) framework, which initiated the regular use of the scale in

1. Overview 3

forensic services in the UK. A list of publications referring to EssenCES data is presented on the EssenCES website.

## **Objective of This Manual**

Since the publication of the validation study and the initiation of regular use of the scale in forensic services in the UK, the EssenCES project has received a large number of enquiries regarding support in using the scale and interpreting its findings. In particular, many researchers and clinicians have requested reference norms that would allow them to compare the EssenCES scores obtained in their particular unit/service with the scores obtained in other settings.

This manual tries to respond to these enquiries, as well as providing an overview of the theoretical underpinnings, structure, development, testing, and application of the EssenCES, which will be of value to both clinicians and researchers. Chapter 2 explains the conceptual/theoretical framework underpinning the EssenCES. Chapter 3 provides a plain and practical synopsis of points to consider when applying the questionnaire and scoring and interpreting data. Chapters 4 and 5 offer specific guidance for interpreting EssenCES data from clinical or correctional settings and explain the use of statistical norms presented in the Appendix. In Chapter 6, the manual discusses some limitations of previous studies that have utilised the concept of social climate and considers how the contribution of climate evaluations to providing effective mental health services might be further improved in the future. The concluding Chapter 7 presents ideas regarding the fostering of social climate conditions in institutions. Last but not least, the Appendix offers a compilation of tables to facilitate the interpretation of data and forms for displaying the findings in a simple and easy-to-understand manner.



# 2 Conceptual Framework

**Norbert Schalast** 

## **Measuring Social Climate**

In 1993, a survey on job satisfaction and strain among the staff of forensic and general psychiatric hospitals was prepared in Germany (Schalast, 1995). To meet the study's objective, it appeared essential to evaluate the institutional atmosphere as a crucial aspect of the working and living environment that impacts on staff and patient well-being and satisfaction as well as on the delivery of care. In characterizing a correctional or treatment setting, it is not sufficient to describe only its objective features. The physical, social, and emotional conditions of an institutional setting interact in a specific way and constitute a condition that can be called "social climate or atmosphere," which may over time influence the mood, behavior, and self-concept of the people involved.<sup>1</sup>

In the course of research for an adequate assessment instrument, the social climate scales published by Rudolf H. Moos soon became apparent as the prevailing gold standard for such evaluations. Moos had developed a set of scales with comparable structure and content. Among them were the Correctional Institutions Environment Scale (Moos, 1975), the Community-Oriented Programs Environment Scale (Moos, 1988; Moos, Finney, & Cronkite, 1990) and the well-known

This definition has occasionally been ascribed to Moos (1989) but was first suggested by Schalast and Groenewald (2009).

Ward Atmosphere Scale (WAS; Moos, 1996; Moos & Houts, 1968). He designed similar instruments to be used in schools, families, companies, and other social systems.

The WAS had been designed with considerable effort, as indicated by norms derived from a sample including 160 wards and almost 3,600 patients and 2,000 employees (Moos & Otto, 1974). Moos (1974, p. 27) stated that it had "excellent psychometric properties" with satisfactory *item—subscale correlation* and low to moderate *subscale inter-correlation*. However, Moos' scales have been called into question frequently for a variety of reasons (e.g., Alden, 1978; Denny, Costello, & Cochran, 1984; Røssberg & Friis, 2003b; Wright & Boudouris, 1982), including that the instrument's length and complexity (100 items measuring 10 social climate facets) are not justified by psychometric findings such as *factor analysis*.

Given these limitations to the WAS, Schalast (1997) drafted a concise list of 15 items characterizing facets of the work environment. Subsequent statistical item analyses identified three potential climate traits that were interpreted as "quality of the living environment," "experienced safety," and "feeling of success in therapeutic work". Encouraged by promising pilot results, additional testing of the scale was undertaken that used modified and extended lists of climate items (Schalast, 1997; Schalast, 2000; Schalast, 2008). Scale and factor analyses were used to select appropriate items and to identify climate traits that were stable across different population samples (e.g., patients and staff). A total of 43 "candidate" items were examined in the process of scale development.

Finally, a 15-item instrument emerged, measuring three climate features interpreted as *Therapeutic Hold, Patients' Cohesion and Mutual Support*, and *Experienced Safety*, which became the EssenCES. A validation study (Schalast et al., 2008) conducted in 46 forensic psychiatric wards in Germany confirmed these subscales (see Chapters 4 and 5 for details). In subsequent studies, the EssenCES questionnaire has also been proven to reliably measure social climate in different forensic settings, with its three-trait structure receiving further support (e.g., Day, Casey, Vess, & Huisy, 2012; Howells et al., 2009; Milsom, Freestone, Duller, Bouman, & Taylor, 2014).

With a total of 17 items – 5 per scale plus 2 filler items – the EssenCES is an easy to use and economical scale.

## **Plausibility of the EssenCES Dimensions**

While there is no complex theoretical background to the questionnaire's dimensional structure, the three identified dimensions might be seen to possess considerable "face validity" (Bornstein, 1996). Furthermore, there is manifold psychological evidence indicating their relevance.

Providing a sufficient level of *Therapeutic Hold* and support is an essential feature of any therapeutic setting and relationship. From a patient's perspective, staff should be interested, open-minded, and supportive. Many studies provide evidence that experiencing a positive and supportive therapeutic relationship is one of the best predictors of patient treatment outcomes (Budman, Soldz, Demby, Davis, & Merry, 1993; Luborsky, McLellan, Woody, O'Brien, & Auerbach, 1985; Martin, Garske, & Davis, 2000).

Patients'/Inmates' Cohesion and Mutual Support may indicate whether characteristics of a "therapeutic community" (Rapoport, 1960) exist on a ward/wing. In group psychotherapy, patients' cohesion is strongly associated with treatment outcome (Beech & Fordham, 1997; Budman et al., 1993) and group cohesiveness is considered a central curative factor (Yalom, 1985). Furthermore, many group-based psychological treatments aim to establish a cooperative and cohesive group climate as a decisive factor in the treatment process (Foulkes, 1975; Linehan et al., 1999; Ross & Fabiano, 1985).

Safety is thought to reflect a basic human need (Maslow, 1943). An atmosphere of aggressive tension and threat of violence is not conducive to effective treatment. "By definition, a therapeutic in-patient environment will be one where there is little or no violence and aggression" (Collins & Munroe, 2004, p. 131). On the other hand, posing a risk to others may be the rationale for psychiatric in-patient treatment and is a required precondition of forensic psychiatric detention. Undoubtedly, such forced collectives – composed of at-risk personalities – constitute problematic social systems. Hence, *Experienced Safety* can be considered a crucial dimension to characterise a therapeutic climate in both general and forensic psychiatry, as well as a rehabilitative climate in prison settings.

#### **Are Three Dimensions Sufficient?**

Narrowing down the inspection to three facets of the social climate doubtless represents a limitation and it might seem worthwhile to consider a greater number of social climate dimensions. On the other hand, studies exploring the dimensionality of social climate data have frequently yielded three-factor solutions (Ellinghaus, Groeneveld, Baumann, & Eckmann, 1981; Schöttke & Wiedl, 1990; Wilkinson, 1973; Wright & Boudouris, 1982). Consequently, a model of social climate that focuses on three simple, well separated facets that provide face validity and obvious relevance seems appropriate. It represents a compromise in that it is sufficiently complex to recognise that social climate is not a unitary construct, and at the same time avoids being overly complex in a way that cannot be supported by statistical findings. The specific usefulness of the EssenCES dimensions for evaluating and fostering the social climate of a treatment setting is also considered in Chapter 7.