

## Workplace Culture Critical Analysis Tool Revised (WCCAT<sup>R</sup>)

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In Publication

This method combines observations of practice using the four domains of The Person-centred Practice Framework (McCormack & McCance, 2017) with participatory analysis, action planning and evaluation. The observation seeks to explore what is sensed (i.e. seen, heard, smelt, tasted and imagined) and perceived by observers as a way into accessing what matters to, and is experienced by, persons in the setting. The intention is to enable teams to engage in critical and creative questioning about what the data means, gain deeper insights into the workplace culture and how collaborative action can be taken to enable the culture (including care) to become more healthful (i.e. good for everyone).

### Questions prior to commencement of the observations

- Do you have a good understanding of/feel comfortable working with the Person-centred Practice Framework?
- Have you read the WCCAT<sup>R</sup> paper/guidelines?
- Have you confirmed that people in the area being observed have received written and verbal information about the observation (and if relevant have you got the appropriate ethical approval)?
- Have you clarified which practitioners (and service users) are taking part in the observation and have they have given permission or consent to take part?
- Have you agreed for post-observation discussion with practitioners (and service users) for clarifying questions?
- Have you agreed times for initial feedback with the team at the end of the participant observation period?

### Profile of the context/workplace

Date: \_\_\_\_\_ Time Period: \_\_\_\_\_ hours to \_\_\_\_\_ hours Observers: \_\_\_\_\_

Purpose of Service: \_\_\_\_\_ Staffing/Skill Mix: \_\_\_\_\_

General comments on design of the care environment as relevant to the observation (*is there anything out of the 'ordinary' that will influence or interfere with the observation?*)

Optional overview statement/commentary on macro context as relevant to the observation. *See macro context in Person Centred Practice Framework; (For example, policy frameworks; strategic frameworks; workforce development; strategic leadership)*



Observation Area 1: PREREQUISITIES

Observer Prompts	Observation Notes including Clarifying Questions	Critical Questions For The Team
<p><b>What do you observe that indicates:</b></p> <p><b>Professional competence</b> - practitioner development/use of knowledge, skills and attitudes to negotiate and provide care. For example:</p> <ul style="list-style-type: none"> <li>• <i>Delivering competent care</i></li> <li>• <i>The knowledge and learning that is privileged in the care setting</i></li> <li>• <i>Practitioners learning and/or developing their professional competence</i></li> </ul> <p><b>Developed interpersonal skills</b> - communicating and engaging with service-users and significant others. For example:</p> <ul style="list-style-type: none"> <li>• <i>Paying attention to non-verbal communication and how this might impact on others</i></li> <li>• <i>Using interpersonal skills to negotiate care</i></li> <li>• <i>Demonstrating respect for self and others</i></li> </ul>		



<p><b>Commitment to the job</b> - commitment to providing person-centred, evidence informed care. For example:</p> <ul style="list-style-type: none"> <li>• <i>Delivering high quality care that is informed by evidence</i></li> <li>• <i>Spending time with people receiving care</i></li> </ul> <p><b>Clarity of beliefs and values</b> – being clear about the values and beliefs that influence care. For example:</p> <ul style="list-style-type: none"> <li>• <i>Demonstrating actions that reflect core values and beliefs</i></li> <li>• <i>Working with a shared vision</i></li> <li>• <i>Consistency between desired values and beliefs and those experienced by others</i></li> </ul> <p><b>Knowing ‘self’</b> -awareness of ‘self’ when engaging with others. For example:</p> <ul style="list-style-type: none"> <li>• <i>Drawing on own and others strengths and skills</i></li> <li>• <i>Seeking out and making use of feedback</i></li> <li>• <i>Providing challenge and support in the setting</i></li> </ul>		
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Observation Area 2: PRACTICE ENVIRONMENT

Observer Prompts	Observation Notes including Clarifying Questions	Critical Questions For The Team
<p><b>What do you observe that indicates:</b></p> <p><b>Appropriate skill mix</b> - practitioners experience and expertise to care for patients. For example:</p> <ul style="list-style-type: none"> <li>• <i>Skill mix in the team delivering care</i></li> <li>• <i>Visibility of practitioners</i></li> <li>• <i>Input from all team members being valued</i></li> <li>• <i>Level/type of busyness within the environment</i></li> </ul> <p><b>Shared decision-making systems and power sharing</b> - evidence of practitioners discussing decisions. For example:</p> <ul style="list-style-type: none"> <li>• <i>Practitioners (across disciplines) and leaders actively engage with each other in decision making and taking action</i></li> <li>• <i>How people are talked about and the language used</i></li> <li>• <i>Practitioners appear well informed about what is going on in the team and the wider organisation</i></li> </ul> <p><b>Effective staff relationships</b> - Practitioners working together, evidence of collegiality. For example:</p> <ul style="list-style-type: none"> <li>• <i>Everyone being encouraged and supported to contribute to person-centred care</i></li> <li>• <i>Practitioners offering and receiving challenge and support</i></li> </ul>		



<p><b>Supportive organisational system</b> - policies and other resources that support care delivery. For example:</p> <ul style="list-style-type: none"> <li>• <i>Drawing on evidence informed policies supporting the delivery of person-centred care</i></li> <li>• <i>Practitioners feeling recognised, supported and involved in decision-making about care (environment) and organisational governance</i></li> </ul> <p><b>Potential for innovation and risk taking</b> - Support for sharing ideas to improve practice. For example:</p> <ul style="list-style-type: none"> <li>• <i>Preparedness to take calculated risks and/or utilise new ways of working</i></li> <li>• <i>Promoting innovation in care</i></li> <li>• <i>Proportionate risk assessment; where people's needs are balanced with risk reduction</i></li> </ul> <p><b>The physical environment</b> - The care environment is welcoming and conducive to delivering person-centred care. For example:</p> <ul style="list-style-type: none"> <li>• <i>People friendliness of the physical environment</i></li> <li>• <i>Cleanliness, safety, tidiness, light, colour, noise</i></li> <li>• <i>Use of space and spaces</i></li> </ul>		
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**Observation Area 3: PERSON-CENTRED PROCESSES**

Observer Prompts	Observation Notes including Clarifying Questions	Critical Questions For The Team
<p><b>What do you observe that indicates:</b></p> <p><b>Working with persons’ beliefs and values-</b> Practitioner is aware of and works with service-user’s values (what is important) and beliefs (how things are). For example:</p> <ul style="list-style-type: none"> <li>• <i>Diversity is respected and included in care</i></li> <li>• <i>Privacy is honoured</i></li> <li>• <i>Needs and choices are known and included in care processes</i></li> <li>• <i>Practitioners get to know service users and use the knowledge as part of engagement and care</i></li> <li>• <i>Practitioners seeking feedback on how people make sense of their experiences</i></li> </ul> <p><b>Engaging authentically -</b> Practitioners are genuine in the way they engage with others. For example:</p> <ul style="list-style-type: none"> <li>• <i>Practitioners being their natural-self</i></li> <li>• <i>Understanding the person’s perspective and where appropriate resolving differences</i></li> <li>• <i>Being present when working with service users</i></li> </ul>		

<p><b>Shared decision making</b> - Evidence of practitioners involving patients and those important to them in decisions about care. For example:</p> <ul style="list-style-type: none"> <li>• <i>Choices and decisions are represented in care planning, documents, and discussions (such as hand-overs/reports and meetings)</i></li> <li>• <i>Others that matter to the person receiving care are included and involved in care</i></li> <li>• <i>Shared decisions are being made and acted on</i></li> </ul> <p><b>Being sympathetically present</b> - Practitioners listen and take time to find out what is important for the patient. For example:</p> <ul style="list-style-type: none"> <li>• <i>Persons narratives/care experiences is listened to and responded to</i></li> <li>• <i>Practitioners pay attention to the person's needs and not only the immediate task at hand</i></li> </ul> <p><b>Working holistically</b> - attentive towards a person's physical, emotional, sociocultural and spiritual needs. For example:</p> <ul style="list-style-type: none"> <li>• <i>Persons are receiving care that reflects all the domains that matter to them</i></li> <li>• <i>Choices are reviewed and care plans updated as needed</i></li> </ul>		
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**PERSON-CENTRED OUTCOMES:** Summary of immediate/outline or provisional verbal feedback from the observers to the team. You might find it helpful to reflect on how what you have observed contributes to the existence of a healthful culture. A key question could be: What have you observed that indicates that service-users and practitioners experience the way things are done within the setting as being conducive to their well-being and personal growth?

**Space to organise feedback comments and critical questions or for other notes:**