

GUIDELINE FOR FACT WHITEBOARD MEETINGS

Organisation

Running a good FACT whiteboard meeting relies heavily on its tight organization. FACT whiteboard meetings need to take place a minimum of three times a week and should last a maximum of one hour per meeting. The planning should be clear to all members. All members presenting on the day of the meeting are required to take part in it. When a team member is unable to attend, he/she provides all relevant information for the meeting to an available colleague and seeks a replacement for any vital tasks he/she is responsible for during the meeting (such as being the chairman). At all times, the team needs to be able to consult a psychiatrist during the meeting. No disturbances should take place during the FACT whiteboard meeting. This requires: booking a room that is sufficiently quiet, all team members to be in time for the meeting, all members to know the whiteboard procedure, telephones to be answered after the meeting.

Structure

A digital FACT-whiteboard that is connected to the electronic healthcare record should be used. The FACT whiteboard contains information about: the reason for placement on the whiteboard, the social network, substance (ab)use, legal issues, case managers, the client's wishes and goals. Finally, the chosen interventions should be included. Additionally, an indication of the safety risks can be included.

Roles and responsibilities

All team members work according to the ideals of the FACT model and heed the proper use of the FACT whiteboard procedure, including the correct usage of upscaling and downscaling criteria. To attain the goals of the FACT whiteboard meeting, all members share relevant information about the clients on the FACT whiteboard and collectively ensure that the planning allows for intensive treatment contacts. It is important that all members stimulate and motivate each other to share their views and knowledge. If this does not happen enough, the chairman should bring this to attention. Home visits should be evenly assigned to the team members, fitting their expertise. Finally, there are some specific tasks assigned to certain roles during the meeting:

Chairman:

- ensures that the meeting takes place in an orderly fashion and follows the FACT whiteboard procedure.
- ensures that all clients on the FACT whiteboard are discussed during the meeting.
- mediates and steers towards a decision if team members have opposing opinions.

Psychiatrist:

- determines whether (further) optimization of the medication is necessary.
- weighs the various safety aspects.

Case manager:

- determines whether the advance directives need to be updated.

Minutes secretary:

- takes minutes directly on the FACT whiteboard.

FACT

CHECKLIST FOR DAILY TEAM MEETINGS

ORGANIZATION

- The FACT whiteboard meetings should be held at least three times a week with a maximum duration of 60 minutes per meeting.
- Location and time of the FACT whiteboard meetings are planned and known in advance to all team members.
- The room is suitable for the number of participants, and the location is in a quiet but central part of the building and has all (projection) means necessary.
- An up-to-date FACT-whiteboard meeting procedure is present and can be used.
- At least two team members can function as chairman.
- All team members are familiar with the FACT whiteboard meeting procedure and handle accordingly.
- Team members are on time in order to prevent any disturbance.
- In the absence of a team member, important information will be conveyed to another team member in advance.
- In the absence of a psychiatrist, the team can consult an acting psychiatrist and/or replacement psychiatrist.
- Team members continue to be available for emergencies, but calls are answered outside the meeting to prevent any disturbance.
- The FACT whiteboard is linked to the electronic healthcare record.

TEAM COMPOSITION & ROLES AND RESPONSIBILITIES

Team composition

- All active team members are present at the FACT whiteboard meetings.

Roles and responsibilities

The team leader:

- propagates the vision of the FACT Model.
- arranges a suitable location that has all the resources needed for the FACT whiteboard meetings.

The chair:

- starts the FACT whiteboard meetings.
- ensures that all clients on the FACT-whiteboard are discussed.
- maintains order and concentration in the team members.
- ensures that the FACT whiteboard procedures are followed.
- ensures team members will actively invite one another to share ideas and information and prevents single team members to dominate the discussions. If necessary, the chair will actively invite team members to share.
- mediates in discussions between team members when no consensus is reached.

- draws conclusions from discussions when team members don't do so themselves.
- can facilitate reaching a decision quickly.
- determines whether the information is relevant to discuss during the meeting and prevents a discussion about the treatment plan.

The psychiatrist:

- propagates the vision of FACT.
- assesses the need for medication adjustments and the need for safety measures
- consults the other team members.

Other team members:

- are familiar with the FACT-whiteboard procedure and act accordingly.
- share relevant information about the clients.
- assess whether their clients' advanced statements should be updated when the clients are scaled up.
- keep room in their agendas to be able to scale up from case management to assertive community treatment.
- encourage and motivate each other to share ideas, new approaches and knowledge, and, if insufficient, request one another to do so.
- summarize conclusions together.
- take heed that the FACT whiteboard procedures are carried out.
- assign a teammember to check the digital FACT whiteboard and make changes.
- make sure that home visits are evenly distributed across the team members, taking into account team members' competencies and specific areas of expertise and the client's preferences.
- monitor the correct use of upscaling and downscaling criteria.

STRUCTURE

- A digital FACT whiteboard is used.
- Information on the client's social network, substance abuse, legal situation, case managers, goals, and wishes are shown on the FACT whiteboard.
- The reasons for upscaling and interventions are noted.
- Risk and safety precautions can be noted on the whiteboard.
- All clients on the FACT whiteboard will be discussed during the meeting.
- All team members are actively invited to contribute to the FACT whiteboard meetings.
- Prevent interruptions during the meeting.