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Need for a Psychiatric Facility to Develop a Clinical Practice Guideline on Self-Care to Give to Patients Upon Discharge

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Walden University

College of Nursing

This is to certify that the doctoral study by

Judith Agwu

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee
Dr. Margaret Harvey, Committee Chairperson, Nursing Faculty
Dr. Diane Whitehead, Committee Member, Nursing Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2026

Executive Summary: Clinical Practice Guideline

Need for a Psychiatric Facility to Develop a Clinical Practice Guideline on Self-Care to Give to Patients Upon Discharge

by

Judith Agwu

Executive Summary Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

February 2026

Summary

The project is a Doctor of Nursing Practice (DNP) clinical practice guideline (CPG) on the need for a psychiatric facility to develop a CPG on self-care to give to patients upon discharge. The practice problem was a healthcare facility did not have guidelines to educate patients on self-care upon discharge. Addressing the problem within nursing practice can promote self-care practices and improve overall health outcomes for patients with mental illnesses. The practice-focused question that guided this project was: will a CPG potentially increase self-care among discharged patients? The purpose of the study was to develop a CPG on self-care for nurses to give to patients upon discharge. Panel members were invited and given information on how to appraise developed guidelines based on the Appraisal of Guidelines for Research & Evaluation II (AGREE II) tool. Seven panel members rated 100% for all 23 items of the AGREE II tool, indicating the guideline comprehensively addressed essential elements, was clear, and had strong clinical applicability. Also, all reviewers rated 100% overall quality of guidelines as 100% and recommended their use in clinical practice. This project enhances nursing practice by empowering nurses to deliver evidence-based education that enhances patients' self-care capacity, supports recovery, and prevents readmissions. The project contributes to positive social change by advancing health literacy, promoting self-management, and improving overall wellbeing. Additionally, this project supports diversity, equity, and inclusion by addressing unique needs of individuals with mental illnesses by improving equitable access to self-care education.

Background

The gap in practice is the healthcare facility does not have guidelines to educate patients on self-care upon discharge. One of the leading causes of poor self-care practices is inadequate knowledge, leading to adverse health outcomes due to unhealthy daily living activities, poor oral care, inadequate diet, and isolation (Chen et al., 2022; Osama et al., 2023). According to White et al. (2021), self-care can promote health and prevent diseases, illnesses, and physical and emotional traumas that affect patients' biopsychosocial wellbeing. Malodorous patients can suffer from isolation and discrimination from family and friends, which may result in depression. However, when patients know the importance of self-care, they tend to care for themselves, improving their self-worth. Healthcare providers have a critical role in terms of influencing proper self-care practices among patients.

Therefore, the project question is: will a CPG potentially increase self-care among discharged patients? Patients with mental illnesses often face obstacles involving personal self-care or wellbeing, social relationships, and work productivity (Chen et al., 2022). Mental illness impairs individual functioning and alters perceptions, leading to poor self-care and hygiene (Goud et al., 2021). The project involved developing a CPG on self-care for the facility to give to patients upon discharge. It focuses on raising awareness of how self-care practices such as mindfulness, exercise, proper nutrition, and social interaction can enhance mental, emotional, and physical health of patients. Additionally, it emphasizes self-care as a complement to medical treatment, helping patients regain control, improve coping skills, boost self-esteem, and enhance quality of life and long-term recovery outcomes. The facility will keep track of any improvements

in patient reports in terms of engaging in physical exercise, medication adherence, adequate sleep hygiene, healthy eating, stress management, not missing medical appointments, managing care, and accepting self-care presents.

Yaffe et al. (2024) recruited home-based seniors with chronic undermanaged mental illness symptoms and compared two brief self-care interventions: cognitive behavioral therapy (CBT) self-care tools with up to three calls from a trained lay coach versus CBT self-guided tools alone and stated self-care interventions are a first step in terms of managing mental health symptoms that are linked with lifestyle limitations and social isolation. Lay coaching improved patient engagement with self-care tools, which are low-cost and accessible options for addressing immediate mental health needs remotely.

Mehjabeen et al. (2023) explored effects of self-management training on medication adherence and relapse rates among people with chronic schizophrenia in urban and rural Shanghai. The 201 participants were divided into a control group receiving standard care and intervention group that received weekly self-management training for 6 months, followed by monthly booster sessions for 24 months. One-hundred and ninety-four (95.6%)participants completed the study. While both groups were similar at base line, after 30 months, the intervention group showed significantly improved medication adherence and better illness insights, and reported taking higher doses of antipsychotic medication.

Griffiths et al. (2024) stated those experiencing psychological distress or preexisting conditions are more likely to engage in self-care, with lifestyle changes being the most common method. Women and young adults between 18 and24 often talk to

friends and adjust their diet and exercise. Psychological distress can hinder self-care, stressing the importance of professional mental health support. Many countries responded by enhancing access to mental health services, such as telephone lines and online resources while promoting positive behaviors like staying active and socially connected (Griffiths et al., 2024). Self-care, whether with or without healthcare provider support, remains essential for maintaining health and coping with mental illness.

Sivakumar et al. (2024) stated mental health issues involving self-care are significant public health concerns requiring systematic interventions and increased awareness. Public health systems, especially health and wellness centers and primary health centers, play a crucial role in promoting mental health and wellbeing due to community access. Technology is an essential strategy for effectively implementing and scaling up services. Personalized interventions can facilitate individualized care plans, particularly in outpatient settings with diverse patient profiles.

Sabri et al. (2023) claimed the number of legal cases against healthcare practitioners in each country correlates with the extent of patient rights granted by the state. A greater number of rights may lead to more violations and legal cases, while fewer rights may lead to infringement on basic human rights. The pursuit of an ideal balance involving patient rights is ongoing. While patients have the right to refuse self-care, healthcare professionals have the responsibility to develop strategies to support patients in terms of meeting their self-care needs.

Lack of self-care can be addressed through interprofessional collaboration between providers, patients, and caregivers (Karimirad et al., 2022; Vaseghi et al., 2022; White et al., 2021). White et al. (2021) highlighted the significance of self-care as a

clinical practice for promoting overall health and preventing diseases and argued self-care practices were crucial in terms of addressing physical, emotional, and social wellbeing, leading to better health care outcomes. In addition, Vaseghi et al. (2022) found enhancing patients' self-care practices significantly correlated with interprofessional collaboration in healthcare systems.

Clinical Practice Guideline Development

Seven expert panel members are DNPs with expertise in clinical research and psychiatry and familiarity with CPGs were invited to appraise the developed guideline. The panel was given instructions on how to appraise the CPG based on the AGREE II tool. There was no conflict of interest, and a formal invitation was extended to them, ensuring credibility and integrity of the panel. According to Perez (2025), the AGREE II tool is a standardized instrument to assess CPG quality and rigor. The tool is used to evaluate six quality domains and ensure guidelines are transparent, evidence-based, and applicable. The AGREE II tool improves clinical guidelines, ensuring they align with current evidence-based medicine standards and are more effective when implemented in real-world clinical practice. The tool helps ensure recommendations are evidence-based and can be tailored to needs of healthcare professionals and patients (Perez, 2025).

Panel members were briefed on the AGREE II tool and its purpose. The AGREE II tool comprises 23 critical items within six domains and two global rating items (overall quality and recommendation). Each expert panel member independently reviewed the guideline using the AGREE II tool. The 23 items are rated on a seven-point scale (1 = strongly disagree, 7 = strongly agree). Each domain assesses a different aspect of the guideline.

Results

Seven expert panel members reviewed the developed guideline based on AGREE II tool domains. The maximum possible rating for the first domain with three items, was 21 and all reviewers rated the maximum (100%). All reviewers rated 100% for all items across the six domains, indicating their agreement that the guideline met required rigor and quality (see Table 1). Besides the six domains, all reviewers rated overall perfect quality quality of guidelines.

Table 1

EXPERT PANEL REVIEW

Domain	#Items	Min	Max	Reviewers Score	Average %
Scope and Purpose	3	21	147	147	100
Stakeholder Involvement	3	21	147	147	100
The rigor of Development	8	56	392	392	100
Clarity and Presentation	3	21	147	147	100
Applicability	4	28	196	196	100
Editorial Independence	2	14	98	98	100
Overall Assessment of Quality	1	7	7	7	100

Note. Max = the maximum possible score of all items of the domain for all seven reviewers. Min = The minimum possible score of all items of the domain for all seven reviewers. Average % = the mean percentage score of all reviewers for the domain.

The final question reviewers used to appraise the guideline was related to their recommendation for use of the guideline. Available options for the recommendation were yes, yes with modification, and no. Six (85.71%) reviewers recommended use of the guideline, and one (14.29%) recommended their use with some modification.

Based on the AGREE II tool, results indicated reviewers confirmed all essential elements of the CPG were adequately addressed. All reviewers rated the guideline perfectly, indicating it was clear and comprehensible to them. Overall, their recommendations supported use of the guideline with minor refinements.

Seven reviewers completed the AGREE II tool expert panel review, which included results from 23 critical items within six domains using a Likert scale. Descriptive results indicated unanimous agreement regarding high quality of the CPG that was developed for this topic. Unanimous agreement reflected expert consensus regarding the guideline's rigor and relevance, underscoring the essential role of healthcare facilities in terms of guidelines to educate patients on self-care upon discharge. Therefore, these findings have several impacts on the organization. First, the CPG can be applied to improving patients' self-care practices and enhancing healthcare outcomes and overall wellbeing. Engaging in self-care helps in terms of mitigating preventable health conditions and augmenting medical treatment that are provided in healthcare facilities to enhance overall patient health outcomes (Moulaei et al., 2024). Second, the intervention can promote the organization's effectiveness by providing required resources to improve holistic care. The guideline will promote self-care among patients, ensuring they receive quality and comprehensive care beyond medical treatment. Third, the project addresses barriers to self-care and promotes inclusivity, which aligns with broader organizational

goals relating to diversity, inclusion, and equity. Patients with mental illnesses often experience challenges involved with engaging in self-care, social relationships, and work productivity; therefore, having specific guidelines that are designed for this population will enhance self-care and consequently improve their health outcomes. Fourth, continued implementation of the intervention can lead to the organization implementing policy changes regarding use of self-care strategies ensuring long-term sustainability of the CPG.

There were several limitations to the project. The expert panel is drawn from a single mental healthcare facility, limiting generalizability of findings to other settings . The findings may not have captured long-term impacts and sustainability of behavior changes among patients which may have the potential for inaccuracies because self-care practices can fluctuate over time. Also, a small sample of only seven DNP reviewers appraised guidelines, limiting diversity of perspectives from professionals.

The project was relevant beyond the local site because it addresses a common practice gap in healthcare management among providers, which has implications for patient outcomes and care quality across other care facilities. Mental health is a global cause of disability, with millions of people facing challenges involved with accessing quality care and support (Mongelli et al., 2020). By addressing the gap, the project provides valuable insights and interventions that can be adapted and implemented in diverse healthcare settings globally. Also, the project's focus on interprofessional collaboration contributes to efforts involved with reducing the burden of mental illnesses on individuals, families, and communities worldwide.

Conclusions

Development and expert appraisal of this project's CPG demonstrated high rigor and quality as reflected by unanimous 100% ratings across all AGREE II domains. All reviewers confirmed the guideline effectively addressed all essential elements, was clear, and had strong applicability for clinical use. This expert consensus validates the CPG as a credible tool to guide nursing practice in terms of promoting patient self-care upon discharge, particularly among individuals with mental health conditions.

Project findings have significant implications for nursing practice. The CPG empowers nurses to deliver evidence-based education that enhances patients' self-care capacity, supports recovery, and prevents readmissions. By integrating the guideline into daily practice, nurses can strengthen patient engagement, improve adherence to treatment plans, and foster holistic and patient-centered care. From a broader perspective, the project contributes to positive social change by advancing health literacy and self-management among patients, reducing preventable complications, and improving overall wellbeing. Additionally, the guideline promotes diversity, equity, and inclusion by addressing unique needs of individuals with mental illnesses because this population often experiences disparities related to access to quality care. By improving equitable access to self-care education and support, the guideline enhances inclusion and helps address gaps in health outcomes for patient groups. Recommendations include a comprehensive approach to self-care in order to further enhance the organization's approach to promoting patients' wellbeing and fostering a culture of health and wellness among them. Implications for nursing practice in this patient population include promoting self-care practices and improving their mental health outcomes.

By integrating self-care practices into nursing practice, healthcare workers can empower patients to take an active role in managing mental health conditions and improving their overall wellbeing. In addition, self-care initiatives can help address disparities in terms of access to care and ensure that all individuals, regardless of background or ethnicity, have equitable opportunities to engage in self-care.

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Appendix A: Introductory Letter

Dear team members/stakeholders,

The Clinical Practice Guidelines (CPG) development is on the Need for a CPG in a Psychiatric Facility. The title of the study is Improving Healthcare Workers' Knowledge on the Importance of Self-care in People Diagnosed with Mental Illness.

Your expertise in mental health is invaluable, and your insights, and critical assessment of the quality and rigor of this project will significantly contribute to this endeavor. We utilized the AGREE II tool to evaluate this Clinical Practice Guidelines. The AGREE II tool is a widely recognized framework designed to assess the quality of clinical practice guidelines, focusing on aspects such as scope and purpose, stakeholder involvement, rigor of development, clarity of presentation, applicability and editorial independence to ensure they are based on sound evidence and developed with appropriate stakeholder involvement. Your feedback will help certify that the guidelines meet the highest standards of quality and effectiveness.

Appendix B: CPG

Empower individuals with diagnosis of mental illness to actively manage their mental health and adopt coping strategies that enhance their well-being and reduce the daily impact of their condition through consistent self-care practices. White et al. (2021) state that self-care can promote individuals' health and prevent diseases, illnesses, and physical and emotional traumas that affect the patient's biopsychosocial well-being.

- Healthcare workers should educate patients and caregivers about mental illness, its symptoms, and the significance of self-care. This can be achieved by incorporating self-care information into patient handouts and online profiles, empowering patients to engage in self-care more effectively. Sivakumar et al. (2024) noted that mental health issues, especially self-care, are significant public health concerns requiring systematic interventions and increased awareness.
- Encourage patients to engage in regular physical activity that aligns with their preferences and abilities. Aim for at least 30 minutes of moderate aerobic exercise daily, such as brisk walking. Regular physical activity can enhance mood. Goud et al. (2021) noted that mental illness impairs the individual's functioning and alters their perceptions, leading to poor self-care and hygiene.
- Encourage a balanced diet and refer patients to dietitians when necessary. Educate them on the significance of good sleep hygiene practices. Additionally, incorporate mindfulness and relaxation techniques into self-care routines to help reduce stress, improve emotional regulation, and enhance overall mental well-being. Lack of self-care among individuals with mental illnesses can be addressed through

interprofessional collaboration between providers, patients, and caregivers (Karimirad et al., 2022; White et al., 2021; Vaseghi et al., 2022).

- Encourage patients to develop and maintain a strong support network by participating in support groups or community activities to foster peer connections. Social support is crucial for emotional resilience and offers practical coping strategies. Chen et al. (2022) mentioned that patients with mental illnesses often face obstacles in personal self-care or well-being, social relationships, and work productivity.
- Schedule regular follow-ups to assess the effectiveness of self-care practices and adjust as needed. Additionally, gather patient feedback on the usability and impact of self-care interventions in their daily lives. Healthcare professionals are responsible for developing strategies to support patients in meeting their self-care needs (Sabri et al., 2023).
- By empowering patients with the knowledge and tools for effective self-care practices, healthcare providers can significantly improve patient outcomes, promote recovery, and enhance overall well-being. Technology is an essential strategy for effectively implementing and scaling up services. Personalized interventions can facilitate individualized care plans, particularly in outpatient settings with diverse patient profiles (Sivakumar et al., 2024).

Self-care Recommendations

1. Engage in at least 30 minutes of moderate physical activity daily.
2. Prioritize regular health checkups, medication adherence, and screenings.
3. Maintain adequate sleep hygiene (7–9 hours per night).
4. Adopt healthy eating habits, drink enough water
5. Practice regular stress management (e.g., mindfulness, breathing techniques).
7. Follow up with your provider as scheduled.
8. Collaborate and reach out to your team as needed
9. Pick-up samples of self-care products at the front desk
10. Practice healthy habits (e.g., hand washing)

Appendix C: Instructions for Completing the AGREE II Tool

1. **Familiarize yourself with the AGREE II Tool:** Please review the AGREE II instrument, which consists of 23 items across six domains. A brief overview and scoring rubric are attached for your reference.

2. **Read the Guideline Document:** Before beginning your assessment, please read the Clinical Practice Guideline. This will provide context for your evaluation.

3. **Assess Each Item:** For each of the 23 items in the AGREE II tool, please score them on a scale of 1 to 7:

   - 1 = Strongly Disagree
   - 7 = Strongly Agree

4. **Provide Additional Feedback:** After completing the AGREE II assessment, feel free to share any additional thoughts or recommendations that could enhance the quality of the guidelines.

5. **Submit Your Feedback:** Please complete the assessment by September 17, 2025, and return it my email address at Judith.Agwu@Waldenu.edu. Your timely input is greatly appreciated.

Thank you for considering this request. Your expertise is essential in ensuring that our guideline is scientifically sound but also practical and user-friendly. Please do not hesitate to reach out if you have any questions or require further information.

Warm regards,

Judith Agwu (DNP Student)

Appendix D: AGREE II Tool

The Clinical Practice Guideline Development was graded using the Appraisal of Guidelines for Research and Evaluation (AGREE) II tool.

Domain 1: Scope and purpose	• 1.1: The overall objective(s) of the guideline is (are) specifically described. • 1.2: The health question(s) covered by the guideline is (are) specifically described. • 1.3: The population (patients, public, etc.) to whom the guideline is meant to apply is specifically described.
Domain 2: Stakeholder involvement	• 2.1: The guideline development group includes individuals from all the relevant professional groups. • 2.2: The views and preferences of the target population (patients, public, etc.) have been sought. • 2.3: The target users of the guideline are clearly defined.
Domain 3: Rigor of development	• 3.1: Systematic methods were used to search for evidence. • 3.2: The criteria for selecting the evidence are clearly described. • 3.3: The strengths and limitations of the body of evidence are clearly described. • 3.4: The methods for formulating the recommendations are clearly described. • 3.5: The health benefits, side effects and risks have been considered in formulating the recommendations. 3.6: There is an explicit link between the recommendations and the supporting evidence. 3.7: The guideline has been externally reviewed by experts prior to its publication. 3.8: A procedure for updating the guideline is provided.
Domain 4: Clarity of presentation	• 4.1: The recommendations are specific and unambiguous. • 4.2: The different options for management of the condition or health issue are clearly presented. • 4.3: Key recommendations are easily identifiable.
Domain 5: Applicability	• 5.1: The guideline provides advice or tools on how the recommendations can be put into practice. • 5.2: The guideline describes facilitators of and barriers to its application. • 5.3: The potential resource implications of applying the recommendations have been considered.

	• 5.4: The guideline presents monitoring or auditing criteria.
Domain 6: Editorial independence	• 6.1: The views of the funding body have not influenced the content of the guideline. • 6.2: Competing interests of members of the guideline development group have been recorded and addressed.

Appendix E: OBTAINED SCORES

Domain 1	1	2	3			Domain 1	100.00
Reviewer 1	7	7	7	21			
2	7	7	7	21			
				42 obtained score			

Comments

Reviewer 1 Clear and relevant focus on self-care goals.

2 Addresses key issues on mental illness with clarity and focus on self-care.

Domain 2	4	5	6			Domain 2	100.00
Reviewer 1	7	7	7	21			
2	7	7	7	21			
				42 obtained score			

Comments

Reviewer 1 Good to involve non-clinicians

2 Doctor of Nurse Practice (DNP) led

Domain 3	7	8	9	10	11	12	13	14		Domain 3	100.00
Reviewer 1	7	7	7	7	7	7	7	7	56		
2	7	7	7	7	7	7	7	7	56		
									112 obtained score		

Comments

Reviewer 1 Relevant evidence-based studies were used for the project.

2 Evidence supporting the importance of self-care in this patients' population is cited

Domain 4	15	16	17			Domain 4	100.00
Reviewer 1	7	7	7	21			
2	7	7	7	21			
				42 obtained score			

Comments

Reviewer 1 Concise, and key actions for patients are clearly defined.

2 Comprehensible and easy to follow and apply.

Domain 5	18	19	20	21		Domain 5	100.00
Reviewer 1	7	7	7	7	28		
2	7	7	7	7	28		
					56 obtained score		

Comments

Reviewer 1 Use implementation tools

2 Can be apply to other healthcare facilities

Domain 6	22	23			Domain 6	100.00
Reviewer 1	7	7	14			
2	7	7	14			
			28 obtained score			

Comments

Reviewer 1 No conflict of interest

2 Unbiased and based solely on evidence.

Overall Assessment	Quality (1 is low; 7 is high)	M	7.00

Rating

Reviewer 1 7

2 7

Comments

Reviewer 1 Overall guideline quality and recommendation for use.

2 Very useful in providing patients education.

Recommendation for Use: Yes, Yes with modification, or No				(put "1" for Yes and "0" for No	# Yes	# Yes w Mod	# No
	Yes	Yes w Mod	No		1	1	0
Reviewer 1	1	0	0				
2	0	1	0				

Comments

Reviewer 1

2

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

Directions:

1 Fill in the item scored by each reviewer by Item.

2 The score is entered where there is a number in the "red" color.

3 Do not change any other numbers on this sheet.

4 You will see the domain score populate (change from 100 to the number calculated based on your data.

5 Add each reviewer's comments in under each domain.

6 Summarize the comments for each domain when you write up the findings.

If you have more than 2 reviewers, you will need to use a different worksheet.

Domain 1	1	2	3			Domain 1	100.00
Reviewer 3	7	7	7	21			
4	7	7	7	21			
				42 obtained score			

Comments

Reviewer 3 Well-structured and defined objectives.

4 Strong emphasis on disease prevention.

Domain 2	4	5	6			Domain 2	100.00
Reviewer 3	7	7	7	21			
4	7	7	7	21			
				42 obtained score			

Comments

Reviewer 3 Benefit for caregiver involvement

4 Involving other healthcare workers like occupational therapist and personal care attendance.

Domain 3	7	8	9	10	11	12	13	14		Domain 3	100.00
Reviewer 3	7	7	7	7	7	7	7	7	56		
4	7	7	7	7	7	7	7	7	56		
									112 obtained score		

Comments

Reviewer 3 The methods for collecting evidence were clear and outlined.

4 A systematic and comprehensive search strategy is employed to identify relevant evidence.

Domain 4	15	16	17			Domain 4	100.00
Reviewer 3	7	7	7	21			
4	7	7	7	21			
				42 obtained score			

Comments

Reviewer 3 Language is patient-friendly

4 Structured logically, enhancing accessibility for a range of users.

Domain 5	18	19	20	21		Domain 5	100.00
Reviewer 3	7	7	7	7	28		
4	7	7	7	7	28		
					56 obtained score		

Comments

Reviewer 3 Full support from stakeholders and team members

4 Include details on potential barriers and facilitators, practical advice, and support resources.

Domain 6	22	23			Domain 6	100.00
Reviewer 3	7	7	14			
4	7	7	14			
			28 obtained score			

Comments

Reviewer 3 Trustworthiness of the recommendations.

4 Ensures transparency.

Overall Assessment	Quality (1 is low; 7 is high)				M	7.00

Rating

Reviewer 3 7

4 7

Comments

Reviewer 3 Very useful in providing patients education.

4 Clear implementation guidance

Recommendation for Use: Yes, Yes with modification, or No				(put "1" for Yes and "0" for No	# Yes	# Yes w Mod	# No
	Yes	Yes w Mod	No		2	0	0
Reviewer 3	1	0	0				
4	1	0	0				

Comments

Reviewer 3

4

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

Directions:

1 Fill in the item scored by each reviewer by Item.

2 The score is entered where there is a number in the "red" color.

3 Do not change any other numbers on this sheet.

4 You will see the domain score populate (change from 100 to the number calculated based on your data.

5 Add each reviewer's comments in under each domain.

6 Summarize the comments for each domain when you write up the findings.

If you have more than 2 reviewers, you will need to use a different worksheet.

Domain 1	1	2	3			Domain 1	100.00
Reviewer 5	7	7	7	21			
6	7	7	7	21			
				42	obtained score		

Comments

Reviewer 5 Broad applicability across different mental health conditions

6 Relevant to the patients' population

Domain 2	4	5	6			Domain 2	100.00
Reviewer 5	7	7	7	21			
6	7	7	7	21			
				42	obtained score		

Comments

Reviewer 5 Reflects strong confidence that the guideline is inclusive and stakeholder oriented.

6 Considered the views, values, and preferences in a psychiatric facility.

Domain 3	7	8	9	10	11	12	13	14			Domain 3	100.00
Reviewer 5	7	7	7	7	7	7	7	7	56			
6	7	7	7	7	7	7	7	7	56			
									112	obtained score		

Comments

Reviewer 5 The researched articles used were done within five years (2021-2025). The recommendations are reliable, and evidence based.

6 Evidence on the need to improve healthcare workers' knowledge on the importance of self-care in people diagnosed with mental illness were outlined

Domain 4	15	16	17			Domain 4	100.00
Reviewer 5	7	7	7	21			
6	7	7	7	21			
				42	obtained score		

Comments

Reviewer 5 Outlines various types of self-care for example., mindfulness, physical activity, medication adherent and care for activity of daily living.

6 Users can quickly locate critical information.

Domain 5	18	19	20	21			Domain 5	100.00
Reviewer 5	7	7	7	7	28			
6	7	7	7	7	28			
					56	obtained score		

Comments

Reviewer 5 Addresses potential factors that might either support or hinder the implementation of its recommendations, such as cultural, or financial aspects.

6 Offers concrete strategies for implementing self-care practices in mental health care.

Domain 6	22	23				Domain 6	100.00
Reviewer 5	7	7	14				
6	7	7	14				
			28	obtained score			

Comments

Reviewer 5 Addresses an important need

6 Good support for application in practice

Overall Assessment	Quality (1 is low; 7 is high)					*M*	7.00

Rating

Reviewer 5 7

6 7

Comments

Reviewer 5 Can be use by non-clinical staff.

6 useful and relevant in promoting self-care

Recommendation for Use: Yes, Yes with modification, or No				(put "1" for Yes and "0" for No	# Yes	# Yes w Mod	# No
	Yes	Yes w Mod	No		2	0	0
Reviewer 5	1	0	0				
6	1	0	0				

Comments

Reviewer 5

6

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

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Domain 1	1	2	3			Domain 1	100.00
Reviewer 7	7	7	7	21			
				21 obtained score			

Comments

Reviewer 7 Scope is appropriate.

Domain 2	4	5	6			Domain 2	100.00
Reviewer 7	7	7	7	21			
				21 obtained score			

Comments

Reviewer 7 Healthcare providers, as the intended users, ensure it meets their patients' needs.

Domain 3	7	8	9	10	11	12	13	14		Domain 3	100.00
Reviewer 7	7	7	7	7	7	7	7	7	56		
									56 obtained score		

Comments

Reviewer 7 Need for a Clinical Practice Guideline in a Psychiatric Facility is defined.

2

Domain 4	15	16	17			Domain 4	100.00
Reviewer 7	7	7	7	21			
				21 obtained score			

Comments

Reviewer 7 A procedure for future updates was established, ensuring that it remains relevant based on the latest evidence.

Domain 5	18	19	20	21		Domain 5	100.00
Reviewer 7	7	7	7	7	28		
					28 obtained score		

Comments

Reviewer 7 Provides criteria or measures that allow users to monitor, audit, and assess the effectiveness of its implementation over time.

Domain 6	22	23			Domain 6	100.00
Reviewer 7	7	7	14			
			14 obtained score			

Comments

Reviewer 7 Can be integrated into routine clinical workflows

Overall Assessment	Quality (1 is low; 7 is high)				*M*	7.00
Rating						
Reviewer 7	7					

Comments

Reviewer 7 User friendly

Recommendation for Use: Yes, Yes with modification, or No				(put "1" for Yes and "0" for No	# Yes	# Yes w Mod	# No
	Yes	Yes w Mod	No		1	0	0
Reviewer 7	1	0	0				

Comments

Reviewer 7

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

$$\frac{\text{Obtained score} - \text{minimum possible score}}{\text{Maximum possible score} - \text{Minimum possible score}}$$

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2 reviewers

		Max	# items	# reviewers	**Max**	Min	# items	# reviewers	**Min**
Domain	**1**	7	3	2	**42**	1	3	2	**6**
Domain	**2**	7	3	2	**42**	1	3	2	**6**
Domain	**3**	7	8	2	**112**	1	8	2	**16**
Domain	**4**	7	3	2	**42**	1	3	2	**6**
Domain	**5**	7	4	2	**56**	1	4	2	**8**
Domain	**6**	7	2	2	**28**	1	2	2	**4**

$$\frac{Obtained\ score - minimum\ possible\ score}{Maximum\ possible\ score - Minimum\ possible\ score}$$