

The Physically Deteriorating Mental Health Patient

Author(s): Dr Holly Thompson, GPVTS ST2; Dr Waleed Fawzi, Consultant Psychiatrist, Old Age Psychiatry, ELFT; Rosca Marange, clinical nurse manager, Larch Lodge, ELFT

Background:

People with severe mental illness (SMI) have excess mortality compared to the general population, and around 60% of this excess mortality is due to physical illness*, with higher rates of conditions including obesity, Diabetes, Cardiovascular disease and COPD.

Methods:

We worked with nursing staff on Larch Lodge to devise a set of learning objectives related to emergencies and signs of deterioration in the following 3 key areas: Diabetes, Cardiovascular and Respiratory health. We tested staff baseline knowledge and confidence with a questionnaire to identify where improvement was most needed.

In Autumn 2014, we started work on a local QI project to address the learning needs of nursing staff on Larch Lodge, who expressed a desire to learn more about these common conditions and felt lacking in confidence in recognising and dealing with physically deteriorating patients.

* De Hert et al, *Physical illness in patients with severe mental disorders*. World Psychiatry. 10(1): 52-77

After discussing results with our teachers, we held 2 days of interactive local teaching covering our learning objectives. These involved case discussions, practice of SBAR for handover, and teaching on the new National Early Warning Score (NEWS) charts.







Aims of the project:

- Design an improvement project to improve Larch
 Lodge staff knowledge and confidence in recognition and response to the physically deteriorating/unwell mental health patient by 25%.
- Increase the number of amber and red observations (i.e. all physical observations outside normal limits)

Learning:

Our QI project has increased the knowledge and confidence of nursing staff in recognising and responding to the physically deteriorating mental health patient, with all nurses showing an improvement in their scores for correct answers (mean 33% increase) and confidence self-ratings (mean 23% increase) following teaching.

QI methods including formulation of our own objectives and testing staff as a measure of improvement enabled teaching to be tailored to local needs and resources. This in turn uncovered further ideas for future PDSA cycles.

With thanks to the following:

Dr Waleed Fawzi, Rosca Marange and all the staff and patients on Larch Lodge ward

documented to have been appropriately responded to (repeated +/- escalated) to 100%

- Our teachers, Tracy Lindsay (Lecturer, City University) and Jacqui Chapman (Diabetic Nurse Specialist, ELFT)
- Carol Shannon, Physical Health Lead, ELFT
- Dr Kevin Cleary, Dr Amar Shah, Dr Juliette Brown and the QI team at ELFT. For information, contact hollyst@doctors.net.uk

